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ABSTRACT

This report describes ways in which older persons may become involved in the field of home child care. It is intended to provide (1) detailed information on an intergenerational child care (IGCC) program; (2) general information relating to intergenerational contacts and home child care; and (3) "how-to" information for agencies planning to develop their own IGCC program. Chapters of the report present an overview of eastern Iowa's Shared Heritage Child Care Program; indicate what an IGCC program can offer; contrast IGCC with other types of intergenerational programs; provide guidelines for identifying, recruiting, and screening older participants; discuss the legal status of care givers; and explore program support services for care providers, such as training, toy lending, liability insurance coverage, in-home activity visits, child care referral, and the child care food program. Appendix A is a 32-page report titled "The Shared Heritage Program: Effects on Care Givers." Additional appendices provide copies of related materials, including classified ads used in recruiting, program signs, program brochures, press releases, application form, reference check form, home interview form, home safety check form, medical exam form, descriptions of low and high quality care, lists of traditional activities for children, publicity, recruitment posters, guidelines for recruiting clients, and a parent information sheet. (RH)

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SHARED HERITAGE:

An Intergenerational Child Care Program

Sponsored by The Hawkeye Area Community Action Program

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Cedar Rapids, Iowa

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Introduction:

This report describes ways in which older persons may become involved in the home child care field. It is intended to:

- Give detailed information on an inter-generational child care program that was developed in eastern Iowa (The Shared Heritage Child Care Program).
- Provide general information relating to inter-generational contacts and home child care.
- Offer "how-to" information for agencies that would like to develop their own inter-generational home child care program.

The Shared Heritage Child Care Program was funded in its first year with a Research and Demonstrative grant from the Department of Health and Human Services' Office of Human Development Services. While certain elements of the demonstration project may be most relevant to the midwestern setting in which the program was developed, this report emphasizes that the "common denominators" that should be relevant in a variety of situations across the country.

In particular, we hope that the report will be of value to:

- Child Care Resource and Referral Programs
- Elderly Service Agencies
- Rural Human Service Agencies
- Family Day Care Home Associations
- Early Childhood Professional Organizations
- Community Action Programs.

The Shared Heritage Program - An Overview

The Shared Heritage Child Care Program works with persons over the age 55 who are interested in becoming family day care home providers. It is an inter-generational program that brings families needing child care together with mature, experienced care givers. The project builds upon "grandparent - grandchild" type relationships to create a unique system of home child care.

The caregivers associated with The Shared Heritage Program are all independently self-employed and individually responsible for the care that takes place in their homes. A variety of support services are offered by the program to assist the caregivers in providing quality care. These support services include:

- Child Care Training
- Toy Lending Services
- In-Home Activity Visits
- Child Care Referral
- Liability Insurance Coverage
- Reimbursement for the medical exam that is required for state registration
- Monthly newsletters relating to child care
- Sponsorship of the Child Care Food Program (which provices reimbursement for meals served to children and nutritional guidance concerning food service).

The Shared Heritage Program works with older persons and families across five counties in eastern Iowa, a district which includes both rural and urban areas. During the first year of operation 23 older people were intensively involved in the training or other support services offered by Shared Heritage. Approximately 70 children received care in affiliate homes. When demonstration funding ended, The Shared Heritage Program chose to expand its service to include other qualified day care home providers enrolled in the agency's Child Care Food Program, regardless of age. Older people will always continue to be a targeted group for inclusion in the program however.

Agency Sponsor:

The Hawkeye Area Community Action Program (HACAP) is the sponsor of The Shared Heritage Child Care Program. HACAP was established in 1968 and has a six county service area in eastern Iowa. The agency is the local sponsor for a number of major human service programs, including:

- Head Start
- Child Care Food Program (for family day care homes)
- Congregate Meals
- WIC (Women, Infants and Children)
- Weatherization
- Golden Enterprises (an elderly craft program).

Service Area Description:

The Shared Heritage Program operates in a five county area of eastern Iowa. Four of these counties are predominantly rural with an average population of 20,000 .

2.

The fifth county is mostly urban and has a total population of 169,775. Economically, Iowa is struggling; the state has not fully recovered from the 1982 recession and the current farm crisis threatens the well-being of individuals and businesses in rural counties. These economic conditions have an effect both on the local demand for child care and the need some older persons have for supplemental income.

What Can An Inter-generational Child Care Program Offer ?

For Children:

- Loving care provided by a mature, experienced person.
- Promotion of positive attitudes toward older people and the aging process .
- An on-going relationship with a person of "grandparent-age".
- A chance to be introduced to "traditional" childhood activities and to develop a sense of cultural "heritage".

For Interested Older People:

- An opportunity to engage in meaningful work.
- Supplemental income.
- A chance to make a valuable contribution to the lives of children and to see them grow.
- Opportunities for displaced homemakers to use existing skills and to develop new areas.

For Parents:

- Dependable care for their children offered by an experienced person.
- A resource to turn to for practical parenting information and advice.

As human service professionals, why should we want to encourage older people to become involved in home child care?

For child care professionals: We know the need that exists for quality child care and recognize that the greatest determinant of quality is the caregiver and her/his ability with children. While the aging process itself doesn't increase one's abilities with children, older workers as a whole are often overlooked as a resource. Within this largely untapped group are individuals with the interest and background to be excellent caregivers. There are also existing older caregivers who can continue to make a positive contribution to the child care field if they receive services to assist them in their work.

We also recognize the value that an older caregiver can have for children in terms of the development of positive attitudes toward both the aging process and older persons themselves. In daily contact between children and elders, a sense of heritage and "rootedness" develops as well. Children have the opportunity to develop an understanding that generations of children have lived and grown before them. Caregivers can share childhood memories from fifty years ago and introduce children to some of the fun activities that were a traditional part of growing up in an era before T.V. and video games.

For Elderly Service Agencies: An ever increasing percentage of our country's population is elderly. Some older people find themselves out of work a number of years before their Social Security benefits begin and others need a supplemental income source even after they begin to receive Social Security payments. These are compelling reasons for the existence of programs designed to help older workers.

While child care is not work that is suited for all older people, there are individuals who have a lifetime of skills that relate directly to home child care. With services to properly orient and support older home providers, they can greatly benefit from this type of work. Many of the participants in The Shared Heritage Child Care Program have been widows who not only need extra income, but also look forward to the social contact they have with parents and children.

Remaining active and involved can also result in improved self-esteem and health for older people. The Shared Heritage Program is built upon relationships between elders, children and young parents that meet their mutual needs.

Inter-generational Child Care Contrasted With Other Types of Inter-generational Programs

It has only been within the last two or three generations that children and older persons have lived in general isolation from each other. Prior to this, family structures and community lifestyles provided fairly frequent and meaningful contact between the younger and older generations.

Recognizing the value of positive relationships between children and elders, inter-generational programs have been developed in recent years to provide structures within which these two age groups can come together. Inter-generational programs are still experimenting with models for various types of elder-child contacts. Some of the most well-established inter-generational programs involve:

1) Exchange programs between schools and elderly centers
2) Shared facilities by early childhood and senior programs
3) Foster-grandparent programs which focus on one-to-one relationships.

Traditionally, inter-generational contact was a natural part of family and community life; it did not have to be planned for, but occurred as an expected part of daily living. A challenge for professionals today is to develop workable structures for inter-generational contacts which have relevance and practicality for both the older and younger generations.

Inter-generational contacts can be divided into three general types:

1) Family Contacts: The inter-generational element here is an inherent part of extended family relationships. For instance, it is not possible to have a grandchild-grandparent relationship without an inter-generational element being present.
2) Functional Contacts: In this type of inter-generational contact the primary relationship between the individuals involved is for a specific function and the inter-generational element is a secondary consideration. An example in this category is the relationship between a child and an older teacher. The purpose of this relationship is to educate the child. While the age differences between them may be an important aspect of their relationship, it is not their reason for having the relationship.
3) Intentional Contacts: In this type of contact the primary reason for individuals to establish a relationship relates to their desire to have contact with someone of an older or younger generation. Inter-generational programs are generally built upon contacts of this type.

The Shared Heritage Child Care Program combines both the "functional contact" and the "intentional contact". It is vitally important in this program that the older persons involved be able to adequately provide the function (child care) needed by the children and their parents. While participants were screened by age initially, they also had to demonstrate the capability for offering responsible, loving care for children. Parents have indicated they

participated both because of their need for child care and because of their desire for their children to have contact with an older person. It is unlikely, however, that parents would have used the Shared Heritage homes if they felt that inferior care was being offered - even if the person offering the care was older. Thus, in inter-generational child care the function of the relationship (child care) must take precedence over the inter-generational element involved.

This is contrasted with an inter-generational exchange in which an older person and a child intentionally get together to form a relationship. They may only have a very simple activity planned - such as baking cookies. The success of the exchange (and the inter-generational program) is not determined by the quality of the function (ie. the quality of the cookies). With an inter-generational home child care program, though, the quality of the function (child care) must be of the greatest importance.

Inter-generational child care programs should not be started which do not include adequate screening or support services. It is not enough in this case just to bring the generations together, we must work to insure that when they are together that adequate child care is taking place.

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Older Participants --- Identification, Recruitment and Screening

In order to establish a successful inter-generational child care program it is obviously necessary to identify older people who are interested in caring for children.

Initially in The Shared Heritage Program, contacts were made with the numerous elderly service programs in our area including congregate meals, local agencies on aging, senior centers, retirement clubs, church organizations for older people and an elderly craft program. The response from older people in these groups was low.

We have found that the concept of inter-generational child care appeals to a narrow and fairly definable segment of the older population. In order to even have an initial interest, the older people must:

- Genuinely enjoy children and want daily contact with them.
- Be physically able to care for children.
- Not have conflicting interests and demands on their time.
- Have use for supplemental income.
- Have a family situation which permits them to care for children.

In connection with the project, agency staff and research assistants from the University of Iowa conducted a survey of the interest that persons over the age of 55 have in being with and caring for children. The survey included a series of items related to different types of inter-generational contacts. The results indicate that there is greatest acceptance for contact with children in situations that seem to require a minimum of advance scheduling and direct responsibility.

A continuum is formed in the responses to the following items: ranging from most acceptable to least acceptable.

---

1) Greatest Acceptance: Living in the same neighborhood with children:

Would enjoy	Would be O.K.	Would Dislike
52%	43%	5%

2) Having a senior center and a preschool located in separate sections of the same building.

Would enjoy	Would be O.K.	Would Dislike
30%	47%	23%

3) Living in the same apartment complex with children.

Would enjoy	Would be O.K.	Would Dislike
27%	45%	28%

4) Taking care of your own grandchildren 2-3 days per week.

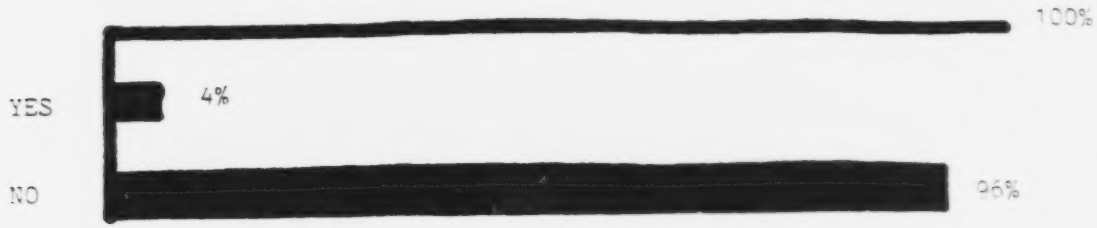
Would enjoy	Would be O.K.	Would Dislike
29%	29%	42%

5) Least Acceptance: Doing volunteer work for 1 hour per week with children.

Would enjoy	Would be O.K.	Would Dislike
25%	26%	49%

These items were asked of 90 persons, age 55 and over, in two counties. In another key survey item, 190 people over 55 responded to the statement:

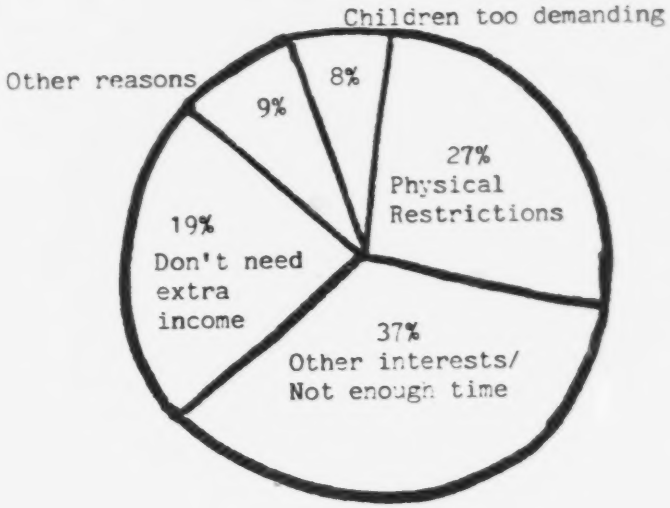
"I have an interest in earning extra income by caring for young children."



Thus, a child care situation (which demands a high degree of structure and direct responsibility) received the lowest approval rating from older persons.

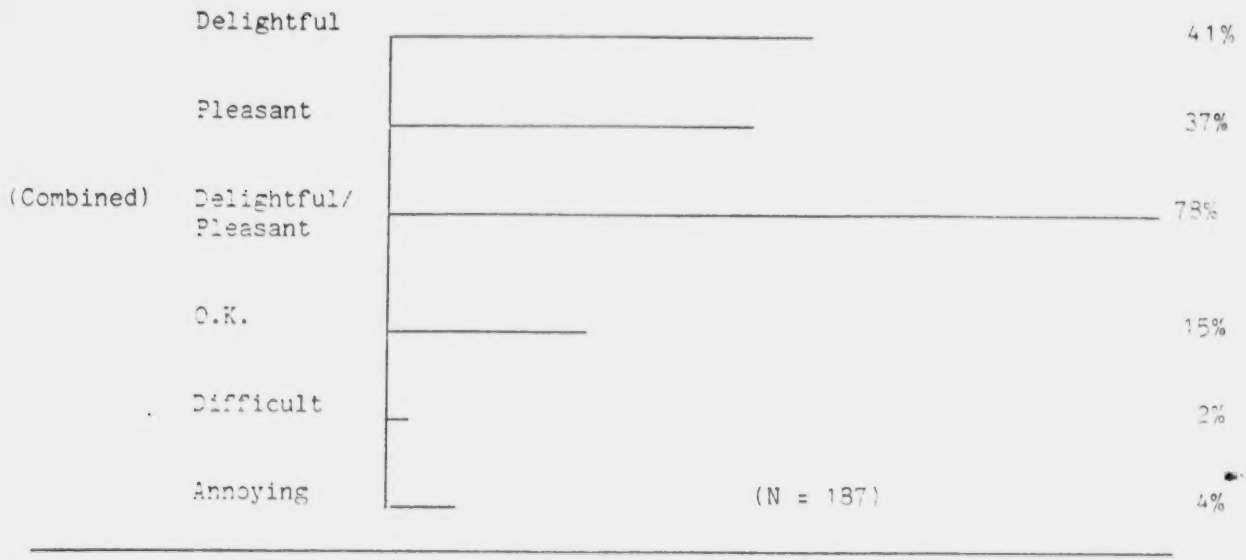
In a follow-up question the respondents were asked:

"If no, what are the reasons?"

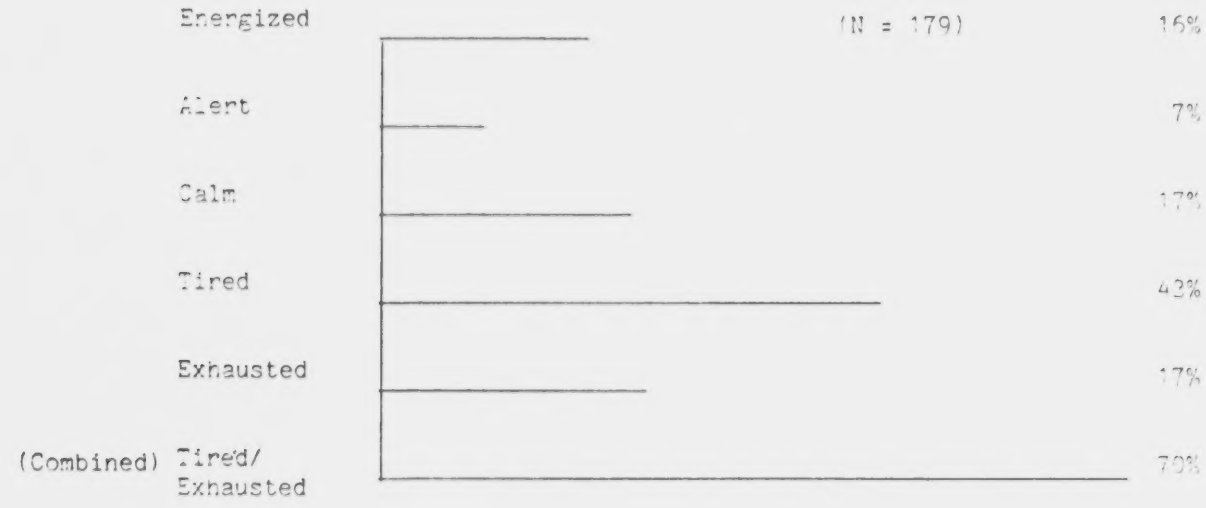


All persons completing the survey were given the following items to answer:

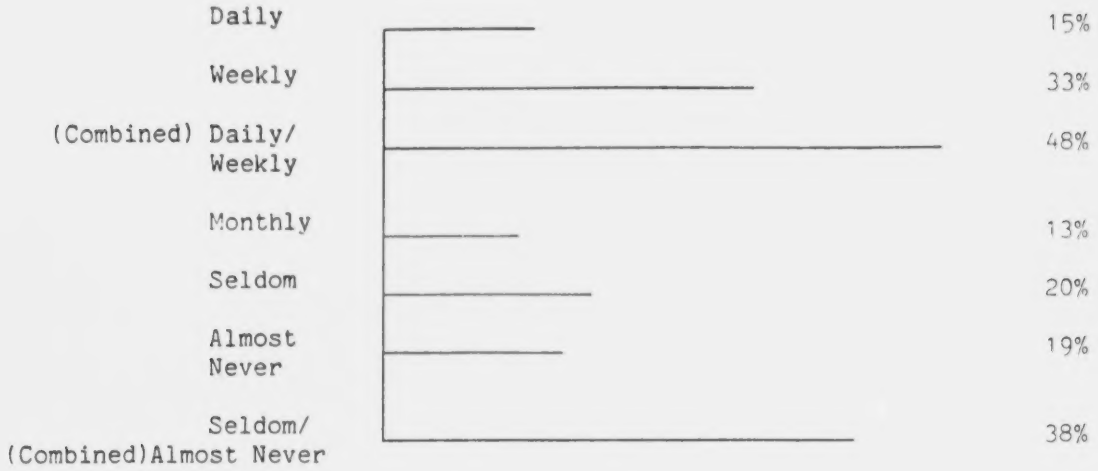
"I find spending time with children to be:"



"When I spend 4-5 hours with children, I feel:"



"Frequency of contact with children under 12 years of age."



Background of Respondents: (N = 193)

Age	%
55-59	12
60-64	14
65-69	20
70-74	26
75-79	10
80+	13

	Sex	#	%
	Male	30	16
	Female	163	84
Marital Status	Married	78	40
	Divorced	18	9
	Widowed	78	40
	Single	12	6

The survey results indicate that:

1) Most older people enjoy spending time with children.
   (78% stated it was either delightful or pleasant)
2) Spending time with children is also tiring.
   (70% stated they were either tired or exhausted after spending 4-5 hours with children.)
3) While reasons for non-involvement in child care varied, few older people (8%) stated it was because children were "too demanding". Many older persons have active lives that would be interrupted by providing daily child care (37% stated either they did not have enough time or that they had too many other interests/activities. Physical restrictions prevented others from participating (27%).

11.

We discovered that in looking for older persons who want to care for children, it is helpful to target individuals who are generally between the ages of 55 and 65 and who may not be part of elderly service programs. In fact, the interested individuals may not even tend to think of themselves as "elderly".

Research assistants from the University of Iowa gathered detailed information on eleven of the Shared Heritage participants. Their findings are included in the Appendix (pages 1-32) entitled: The Shared Heritage Program: Effects On Care Givers.

Recruitment of Older Care Givers

In light of the rather narrow segment of the older population that intergenerational child care appeals to, it is especially important to use recruitment techniques that effectively reach the older people who may have an interest in working in the child care field.

The methods used by The Shared Heritage Program to find participants have included:

- Use of classified advertising (Appendix page 33)
- Signs (Appendix page 34)
- Program brochures (Appendix page 36)
- Community contacts (churches, employment programs, social organizations, etc.)
- Contacts with existing older day care home providers in need of support services
- Press releases, newspaper articles, television and radio features. (Appendix page 38)

Classified advertising is an effective means of finding interested people because it reaches individuals already seeking employment. Many of the individuals responding to classified ads fell in the category of "displaced homemakers". These individuals often brought with them many of the needed skills for home child care.

The inclusion of existing older day care home care providers in the program is also important because it involves people who are often very experienced with children and expands the resources available to them. Our goal with existing providers is to offer support services and training to enable them to continue to be involved in child care. We also hope to be able to improve the quality of the care available. Child care is a traditionally acceptable area for women to be involved in and there are no significant educational or societal barriers that prevent older women from working in the child care field. Thus to a great extent, the older people most interested in working with children may be those who are currently doing it without the benefit of any type of support system. It may be possible for existing child care resource and referral programs at little cost to target this group of caregivers for linkage with needed services. In many cases, they may be unregistered/unlicensed home providers who are generally unaware of the resources available to them or unsure of how to seek them out. Recommendations for adaptation of an intergenerational component by existing child care resource and referral programs is given later in this report.

Screening of Potential Caregivers

A program that encourages individuals to become involved in the home child care field could conceivably do more harm than good if it did not also have an established screening process for "weeding out" inappropriate applicants and unsafe physical settings. A disservice is done to parents and children if even a few substandard settings are promoted along with the majority of good day care homes.

Examples of applicants who were ruled out of The Shared Heritage Program include:

- a kind and generally capable older woman who loved children and wanted to care for them on a daily basis at home. Everything in the screening process went fine except for the medical exam in which her doctor stated that a heart condition prevented her from participating. She was turned down because of this and four months later died from her health problems. This tragedy could have been even greater if she had been caring for a group of children at the time of her death.
- an applicant whose reference check revealed that a male friend, frequently at her house, had a record of sexual assault.
- several applicants who had major safety problems with their homes.

The screening process used by The Shared Heritage Program consists of the following steps:

1) Application: Basic information is requested including name, address, phone, previous experience with children, job history and special interests. (Appendix page 41)
2) Reference Check: The names of three persons familiar with the applicant's abilities with children are requested. Written references are then obtained from them (Appendix page 42) The person supplying the reference has the prerogative to have their comments treated confidentially to permit negative feedback more easily. Non-confidential references are made available to parents upon request.
3) Home interview: A series of questions are asked in the homes of the applicants which concern their general interest in children and their approach to child care. Emphasis here is placed upon ruling out individuals who indicate they have blatantly inappropriate methods of dealing with children. The home interview is also a time to gather more detailed information on the hours of care, ages of children desired, etc. (Appendix page 43)
4) Home safety check: An inspection of each home's physical facilities is conducted and a checklist filled out showing the degree of compliance with safety standards. (see Appendix page 47). Several items on the list are things that can be easily corrected if the home is not in compliance. Other safety features are more major and constitute firm requirements for participation. Safety checks are advised because even parents who are conscientious in choosing a care situation are generally unable to check an entire

4) house over carefully. If approached in a diplomatic way, a safety check can be generally non-threatening, especially if the applicant is given a copy of the safety checklist in advance.

5) Medical exam: During its initial program year, The Shared Heritage Program required (and paid the cost of) a medical exam for each participant. The exam items were designed with input from the University of Iowa's Gerontology Project. (see Appendix page 50)

As mentioned previously, the medical exam was an important part of the screening process because there were applicants who would have been very good caregivers except for significant health problems.

Status of Caregivers

A major issue that arose during the first few months of The Shared Heritage Child Care Program involved the legal status of caregivers.

The original intent of the program was to establish a self-sustaining day care home system. It was planned that parents would pay Shared Heritage a weekly fee from which an administrative fee and the caregiver's reimbursement would be taken. In this arrangement care providers were to be considered as independent sub-contractors who would be paid an established daily rate per child.

Preliminary research revealed a number of similarly structured day care home systems that were having significant legal problems due to the status of caregivers as independent sub-contractors. Claims filed for unemployment compensation by former day care home providers in these systems resulted in court and IRS decisions that determined the caregivers were actual employees, entitled to miminum wage and mandated benefits (FICA, Worker's Comp., over-time, unemployment insurance etc.). Some day care home systems in Virginia closed down because of the back taxes for which they were found to be liable.

The Shared Heritage Program found it impractical to establish a system that recognized caregivers as employees. The cost of the mandated benefits alone would have increased the price of the child care by 15 to 20%. In addition to this, parents would already be paying approximately 15% more than usual to cover Shared Heritage program administration costs. The combined effect of the court rulings concerning caregiver status and the Shared Heritage administrative fee would have been to push up the cost of care a total of 30-35% higher than the going community rate. We felt this would have significantly reduced the number of parents willing or able to use the service.

Caregivers can only legitimately be classified as independent contractors when the sponsoring agency does not:

1) require exclusive use of the home (in which case the care providers can sign up children on their own outside of the day care home system).
2) establish the terms under which the service is offered to families (hours of care, policies of the day care home, daily schedule, etc.)
3) maintain the right to supervise the day care home provider.
4) need to be consulted when the caregiver hires substitutes or assistants.
5) require that the caregiver be trained by its staff.

The independent contractor status for caregivers requires that the agency sponsor refrain from any significant control over many factors that relate directly to home quality.

Since neither employee nor subcontractor status were viable options, The Shared Heritage Program opted to leave the financial arrangements for care entirely up to parents and care providers. For new programs serving day

care homes, outside sources should be considered as the most practical method of funding, rather than an internal funding mechanism.

Complete information on the employee-subcontractor issue can be obtained from:

The Child Care Law Center
625 Market Street, Suite 815
San Francisco, California 94105
(415) 495-5498

Program Support Services for Care Providers

The heart of The Shared Heritage Program for older participants is the array of support services that are offered. These services are designed to assist older people in getting involved in the home child care field and, once involved, to give them the support and resources they need in order to offer quality child care services. Out of the total package of services, some caregivers find all the services valuable, while other individuals are primarily interested in just one or two which initially they feel will be useful to them.

During the course of the project we conducted a poll of 71 child care providers (registered and unregistered) from four rural counties. The respondents indicated their interest in the following support services:

Newsletter on Child Care:	80% expressed interest
Workshops on Child Care:	51% expressed interest
Toy Lending Service:	48% expressed interest
Special Activities for Children:	48% expressed interest
Child Care Food Program:	42% expressed interest.

We also surveyed their feelings toward state day care home registration (which is currently voluntary in Iowa):

13% Strongly liked day care home registration

32% Liked registration

28% Had No Opinion

18% Disliked registration

6% Strongly disliked registration

3% Gave no response

We have seen resistance, particularly in rural areas, to state registration and in looking at the results of the survey feel that the 28% who said they had "No Opinion" concerning registration may tend to be grouped with those expressing negative feelings.

We believe that there is a genuine need for support services to day care homes. While there are many well-trained caregivers, the lack of any entry qualifications for the field means that there are also untrained, inexperienced people becoming involved in home child care. The isolating nature of the work makes it demanding even for well-prepared individuals. The older caregivers, in particular, may feel the need to have an agency contact person to call with questions, concerns or just to talk.

This section of the report provides detailed information on our program support services:

Training:

The older child care provider often brings years of positive parenting and child-rearing skills into the child care setting. A training program for older care-

givers should build upon the practical experience and knowledge they already have and find ways of acknowledging and incorporating their past experience in group discussions. A positive tone should be set that encourages input and participation from caregivers. This can minimize any mixed feelings that participants may have when the training is led by someone who is younger than they are. There may be negative feelings concerning frequent or overt references to "child psychologists" or "developmental theories". The tendency of the caregivers will probably to trust information that is presented in practical, clear terms.

The background of the older caregivers as parents and grandparents does not in itself reduce their need for training. In most instances, older people initially associate "child care' with "babysitting". A concept that should be introduced and reinforced is that of professionalism in child care. This includes instruction in sound business practices, accurate recordkeeping and an understanding of professional standards such as confidentiality.

The activities which the caregivers offer to children in the day care home are very important, yet they don't need to be complex. Many traditional childhood activities that older people are familiar with have strong developmental underpinnings. That fact should be emphasized in the training sessions, in addition to introducing the caregivers to new activities they may want to try with children.

During The Shared Heritage Program's first year, we experimented with a number of training options including:

- A 30 hour training series that involved five sessions over the course of 2½ weeks. This series incorporated observations in a Head Start classroom and hands-on sessions in which learning games were made for use in the homes.
- A ten hour series consisting of an evening and a full Saturday session was held for existing care providers who were beginning their association with the program.
- In addition to workshop sessions, The Shared Heritage Program also conducted home activity visits in which a home visitor worked directly with the caregiver and the children on an activity. These home visits are described in more detail later in the report.

The topics presented in the training series included:

1) Home Child Care Professionalism and Standards: a presentation and discussion of quality dependable child care, versus "non-professional" babysitting. (see Appendix page 51 for a handout developed for this topic).

2) Self-Esteem and Self-Concept in Young Children: a discussion of ways to build a positive self-concept in children and the importance of self-esteem.

3) Cognitive Development: covering the definition of cognitive development and practical ways to promote cognitive growth in children.

4) Day Care Home Regulations and Child Safety: examination of state day care home standards in direct relation to child safety issues. Discussion of preparing the environment properly to reduce accidents.

5) Home Enrivonment For Learning and Play: how can the caregiver's home be arranged to accommodate both the needs of children and the needs of the adults who live there? Practical ideas.

6) Daily Schedules: developing workable and reasonable daily schedules which include a variety of types of activities. Advance planning for child care.

7) Ages and Stages of Development: an examination of what can reasonably be anticipated of children at various stages of development. Having expectations that are developmentally appropriate. This session included a game in which a child's behavior was described and participants tried to assign an estimated age level.

8) Food and Nutrition: what constitutes good nutrition for children. Background information on the Child Care Food Program. Practical ideas for serving foods to young children.

9) Music and Movement with Children: ways to incorporate music into daily day care home activities. Included a demonstration with Head Start children.

10) Child Abuse Prevention, Detection, and Reporting: included a film and advised care providers of their role as "mandatory reporters" under state law. Discussion of experiences caregivers had with children in their communities who had been abused.

11) Relationships With Parents: This is an area of particular importance. Session covered written agreements with parents, communication, handling difficult situations and confidentiality. Discussion included types of families needing child care and working with them in non-judgmental ways.

12) Art Experiences With Children: Simply and fun art activities that can be conducted at home with children.

13) Language Development in Children: Practical ways of promoting language acquisition and usage in day care homes.

14) Children's Literature: a guest speaker discussed things to look for in storybooks for children.

15) Field Trips: fun places to go with children, parent authorization, safety on field trips.

16) Child Guidance and Discipline: emphasis on positive reinforcement and preventive steps that can be taken to "head-off" behavior problems. Effective means of setting limits with children. Discussion of spanking and its unacceptability under state regulations. (Note: it was easier to discuss spanking in terms of state regulations for day care homes than the pros and cons of its effectiveness and appropriateness).

17) Dealing With the Ill Child: what to do if a child is brought in in ill or becomes ill during day. Need for emergency information and good health practices. Common childhood illnesses.

18) First Aid: a guest speaker presented an overview of safety and first aid considerations related to child care. This did not constitute a regular first aid training session because of time constraints.

19) Forms, Procedures and Recordkeeping: basic recordkeeping functions related to day care home operation - child records, financial records, attendance, etc.

20) Dramatic Play / Free Play: examination of play that older caregivers may think of as "dress-up", "pretend", or "imaginative play". Value of dramatic play and props which encourage it. Suggestions for enjoyable "free choice times" and possible materials to have available for children.

20) "Heritage Activities" for Children: care providers brainstormed for fun things they did as children which could be done with children today. (For a complete list of "Heritage" ideas see Appendix page 54).

There are many ways of structuring training programs including conducting them on a monthly basis throughout the course of a year.

The older caregivers who have participated in training have given positive feedback concerning its usefulness to them. (See Appendix page 16).

Toy Lending:

For the older caregiver, toy and equipment lending can be an important support service. Most older people do not have the toys, books, or learning materials needed by children. While some simple toys can be made and children can use household items in imaginative ways, there still needs to be other age - appropriate materials for use in the day care home.

The Shared Heritage Program began its toy lending library without federal funds. Though many more items are still needed, a good beginning was made during the initial program year. The lending service has been built up with privately donated items, state child care equipment monies, items made by program staff or volunteers and business donations. Specific sources have included:

- Donation of a complete line of "Discovery Toys" by a local toy distributor.
- $1,000 worth of equipment and materials donated by a preschool going out of business.
- A major donation of paper materials, stickers and stuffed animals by the Hallmark Corporation.
- Car seats donated by a local service organization.
- Contributions of "give away items" from local businesses such as cloth, yarn, paper, etc.
- "Work-job" learning games assembled by volunteers.

Purchases with state child care equipment funds have rounded out the collection. The general criteria for items have been:

1) Practicality: Is this something that will get actual use in a home? Some preschool educational materials may be perceived by an older caregiver as being too complicated

or technical to deal with. We chose in most cases to "stick to the basics" ie. blocks, trucks, dolls, art materials, etc.

2) Durability: Considering we cannot monitor the day to day use of the materials in the day care homes it is cost effective to buy durable, slightly more expensive equipment that will have a significantly longer life.

3) Number of pieces: While there are puzzles included in the lending library collection, we have generally stayed away from games and materials with a lot of little pieces that can be easily lost.

4) Safety and Sanitation: Particularly when soliciting donations from the general public, it is necessary to carefully examine all items to see if they are safe and able to be easily cleaned. We have not included stuffed animals for rotation in the lending library, but have used them as "give away" items that then become the responsibility of the individual caregiver. Infant and toddler items in particular should be checked with extra care for pieces that may be swallowed and for spaces in which a child's head may get caught.

5) Open-ended Usage: Materials which have many creative uses are generally preferable to toys or games that can only be used one way. Thus blocks, manipulative and dramatic play props are included in the lending library; but electric toys are not.

Toys and equipment are rotated periodically by the home visitor during routine visits.

Liability Insurance Coverage:

In general, homeowner's or renter's insurance does not cover the operation of a day care home. If a child were to get hurt in a home, the caregiver may be liable for medical costs incurred from the accident. As individuals, many home providers have a difficult time finding and affording private coverage. A support service Shared Heritage offers is inclusion in a group liability insurance policy through an insurance company that provides other coverage to our sponsoring agency. The cost is significantly lower and the screening process involved in the Shared Heritage Program makes this group of day care homes a good risk.

In-Home Activity Visits:

Visits by a program staff to a day care home can be very intimidating to home if they are only for monitoring, inspection and observation purposes. These types of visits may not be perceived by caregivers as being helpful or supportive.

In The Shared Heritage Program we chose to institute home activity visits in which the home visitor brings in a new activity and conducts it with the children and care providers in the home. The activities offered in the homes have included:

- Playing with shaving cream at the kitchen table (a messy, but fun experience).

- Carving jack-o-lanterns before Halloween
- Making stew with meat and fresh vegetables supplied by the home providers.
- Using rubber animal stamps and creating books from the pictures the children made.

These activity visits serve additional functions for the home provider and the program. They are valuable for:

- Modeling positive behaviors and activities for the care providers to see.
- Giving time to receive feedback from the providers concerning problems and needs.
- Providing a "social" outlet for the caregiver with another adult.
- Rotating of toys from the lending library.
- Monitoring general conditions in the home in terms of safety, sanitation and interactions between caregiver and children.
- Linkage with needed community resources for caregivers, children or parents. In particular, if a child shows signs of a developmental delay, it may be possible for the home visitor to offer suggestions to the parent or caregiver concerning appropriate follow-through.

Child Care Referral:

Child care referral is an important service for both caregivers and parents. The area of eastern Iowa in which The Shared Heritage Program was developed does not have a community-wide child care referral program, so our agency developed a small, specialized referral system for putting parents in touch with the older caregivers we work with. The ideal situation would be one in which older caregivers are listed as a special referral category within a larger, well-established child care referral program. This would maximize the number of referrals to older caregivers since in many communities the child care service is the "point of entry" into the local child care network.

In establishing our policies for referral we looked to existing referral programs for guidelines. Since our system is smaller there were some additional features we were able to include that may not logistically be possible in a larger system.

In the home interview which we conduct with caregivers we ask a number of objective questions concerning the proposed child care service that we can later use in making referrals. Referrals are only given to homes that have gone through the screening process and which are actively involved in the project.

To increase public awareness of The Shared Heritage Program and its referral service to older caregivers, classified ads were run for several weeks throughout the program year. They were an effective means of informing parents of the program.

Flyers were sent home through elementary schools near participating day care homes concerning summer child care. Other methods to notify the public included:

- Public service announcements sent to local media (newspapers, radio, T.V.). (Appendix page 38).
- Sending notices to 200 agency employees. (Attachment 62).
- Three radio interviews.
- Newspaper feature story. (Appendix page 60).
- Television news segment.
- Posters hung in public locations. (Appendix page 63).

If an established child care referral service developed an intergenerational program, it would need to inform parents of this specialized component; but at least there would already be public awareness of its general services.

When parents call our agency for child care referral we:

1) Give them a basic explanation of The Shared Heritage Program.
2) Tell them of the program goal of promoting quality child care in the homes we work with and explain what we do in this regard (home interview, safety check, references parents can see, training, toy lending, home visitor, and Child Care Food Program).
3) Emphasize that care providers are independently self-employed and individually responsible for the care they offer children.
4) Explain that in making a referral we are simply telling parents about an option that exists for them. They need to make sure the day care home meets their needs and expectations.
5) Obtain from the parents basic information about their child care needs, location preferences, and ages of children.
6) Provide parents with objective information on participating homes that may meet their needs. We do not make recommendations and even avoid using adjectives (however justified) that could be construed as an endorsement ("good, great, kind, sweet" etc.).
7) Send parents an information sheet summarizing the points mentioned above. (Appendix page 66).

While our referral component was generally effective in assisting older home providers in establishing a clientele, we also explained to them that our program was not able to place children nor guarantee that a certain level of referrals to them could be made. We provided them with a handout detailing ways in which they could also be involved in locating children for their day care homes. (Appendix page 65).

Sponsorship of the Child Care Food Program (CCFP):

The Child Care Food Program (CCFP) can be a useful service for older home providers as it offers nutritional guidance and reimbursement for meals served to enrolled children. CCFP is a program of the United States Department of Agriculture which establishes its basic operational guidelines. Each state has a governmental sponsor (often the state department of education) which supervises the sponsorship of the program.

In order to successfully participate in the Child Care Food Program, care providers must:

- be registered or licensed with the state
- maintain and submit attendance and meal service records to their local sponsor
- submit menus for approval that meet USDA nutritional standards and serve the planned foods in sufficient quantities
- meet sanitation guidelines for food service
- participate in monitoring visits and in-service training.

Some older caregivers weren't interested in the Child Care Food Program due to the recordkeeping involved, or due to the small number of children they cared for.

From the standpoint of The Shared Heritage Program, it is very useful to be the CCFP sponsor for older home providers as it affords us additional contact with them. Menu reviews and monitoring visits into the homes for CCFP gives us a chance to observe and provide support for the food service component of their day care home.

Summary and Recommendations

This report describes The Shared Heritage Program in detail, covering its structure, the recruitment of older persons and the support services it has developed. Like most new concepts, the value to be derived from our project as a model doesn't lie in simply labeling it either a "success" or "failure", but in carefully evaluating both its strengths and weaknesses. How can its' successful elements be maximized in future years and replicated in other locations? What elements proved to be impractical and should be eliminated or restructured? What recommendations can be made to other agencies wishing to become involved in inter-generational childcare?

During the course of the program's first year, we saw a number of success stories- older people who became involved in home childcare as a result of the program and existing older caregivers who benefitted from the new resources that the program offered them. The children in these homes received good care and developed warm relationships with their older caregivers. The experience of The Shared Heritage Program suggests that inter-generational childcare is worthwhile for children, parents and older participants. All the parties involved in it can benefit, in ways described earlier in this report.

The project brought with is some frustrations and challenges, as well, though, the major ones being:

1) the challenge of recruiting older persons who are interested in childcare and capable of offering good care.

2) the challenge of building a practical, financially sustainable program base, within which inter-generational childcare can be promoted. The employee-subcontractor issue in particular affects this area.

Recommendations And Conclusions Concerning The Recuitment Of Older Caregivers:

Both our interest survey and our direct experience with the program show that inter-generational childcare appeals to a narrow segment of the older population. This makes it difficult initially to develop a core group of caregivers upon which to base a program. The recruitment approaches suggested earlier in this report will make it easier to target and reach potential participants. Still, it should be expected that it will take a while to build up the number of older caregivers in a program.

It is difficult, too, to reconcile the need for older participants with the equally important responsibility of screening them for basic program suitability. It can be frustrating to see older people that one has worked hard to recruit get screened out of the program. Caregivers may also face problems due to their geographic location- this is especially the case with care providers living in the country.

These recruitment difficulties shouldn't imply that inter-generational childcare is infeasible, rather is simply underscores the need for establishing the right type of program base. The most relevant question is: "How practical is it for an entire program to be built entirely upon inter-generational home childcare? Our experience would suggest that the best option is to establish an inter-

generational component within a broader based program that works with caregivers of all ages. This approach can allow for specialized services to older caregivers, but would not require the large numbers of older participants that are needed to justify and fund a program based entirely on inter-generational childcare. Such a specialized component could initially be a part time responsibility of an existing program staff person. Staff time spent on the component could then be increased as the number of older caregivers grew. Most of the support services needed by older people are also needed by younger caregivers. Therefore, it makes sense to have broadbased services to offer to all care providers with a specialized recruitment and service delivery system targeted toward the older caregiver.

Recommendations and Conclusions Concerning Program Replication by Other Agencies

In light of the recommendations made above, it is important for an agency which has an interest in inter-generational home childcare to examine its existing programs, as well as those of other organizations in the community. How much new service development is needed in order to offer training, toy lending and other types of support to interested older caregivers? What other local agencies may be able to join in a cooperative venture of this nature?

It seems that an emphasis should be placed on developing a specialized system for recruiting older people interested in home childcare and linking them with existing support services.

Our recommendations for specific types of organizations follow:

Child Care Resource and Referral Programs: Great potential exists in resource and referral programs for the development of inter-generational childcare components. Well-established programs often contain the basic services most needed to help older people get started (or remain involved in) the home childcare field. A recruitment campaign targeted at people between the ages of 50 and 65 years would be relatively easy to start and could result in the development of a whole new group of quality daycare homes for the referral service. In The Snared Heritage Program we found that parents were very interested in referrals to older caregivers. Without too much difficulty, a referral program could establish an inter-generational referral category within its general system. This specialized component could be further developed with a newsletter and a support group for the older caregiver. This is essentially a process of highlighting a special aspect of the general resource and referral program. Such a move could represent a potential expansion of the program funding base, as new funding sources may be able to be tapped for the inter-generational component. Training funds for older/displaced workers may be available. An inter-generational component also will spark extra media interest, thus increasing the public visability of the overall resource and referral program. Other community agencies can be assembled on a task force to bring together the contacts and resources needed to recruit and serve older home providers. Of all the possible community organizations, child care resource and referral programs are the agencies most likely to have the existing services needed to promote inter-generational home childcare.

Elderly Service Programs: While elderly service programs don't have childcare-related support services to offer older caregivers, they may be able to act as the catalyst and coordinating agent in establishing an inter-generational childcare project. Once again, a task force of relevant agencies can be formed to bring together the organizations needed to start a program. A natural role for elderly service agencies to play on a task force would be in the area of recruitment and coordination of older persons' involvement. Elderly service professionals can make good use of the contacts they have with older people to identify individuals with an interst in childcare.

Rural Human Service Organizations: In replicating The Shared Heritage model, the greatest amount of new program development would need to take place in rural areas. Few rural areas are served by child care resource and referral systems, so this is not a program linkage that can be made. In developing new programs for daycare home providers in rural areas, we strongly recommend that they target all providers of childcare, regardless of age. There are very few resources currently available to rural caregivers and new support services will do the most good if they are not restricted by age. Specialized recruitment can still take place to involve older persons in rural areas in home childcare. This report should be able to provide ideas for reaching persons over the age of 55 that will be useful to rural human service organizations.

The primary recommendation to all community agencies and organizations, thus, is to consider establishing an inter-generational component within a more broadly based program that serves daycare home providers of all ages. We believe that this approach makes inter-generational childcare a more practical and viable undertaking. In the second year of The Shared Heritage Program we are opening the services we've developed up to other daycare home providers in our area, while still continuing to target older people for involvement.

Inter-generational childcare is a concept of value to both the older and younger generations. Our challenge as human service professionals lies in making it a workable reality. We hope this report will be of value to other organizations interested in bringing children and older people together. Inquiries about The Shared Heritage Project can be directed to:

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The Shared Heritage Program:
Effects on Care Givers

As Americans increasingly enjoy longer lives, they also face the inevitable need for purposeful life activities in the mature years. The spectres of loneliness isolation, and withdrawal all too often characterize the lives of older individuals who are potentially vital and useful contributors to a society in need of human sharing and caring. The lives of many widows especially are devoid of essential human contact and meaning when husbands and children are no longer in the home. Economic circumstances further narrow the life options for many retired individuals, particularly for women who are alone.

Concurrent developments in the lives of young families make the need for child care a paramount consideration. The continuing trend for mothers of preschool and school-age children to pursue jobs outside of their homes has created a need which public policy has failed to address and for which private provisions are often sadly inadequate. In 1981 some 30 percent of women between the ages of 16 and 24 were employed full time, and 48 percent of women between the ages of 25 and 34 held full-time jobs outside the home.[1] When all types of employment away from home was considered, the percentages rose to 60 percent and 70 percent, respectively for the two age groups.[2] Statistics also revealed that among women of all ages, approximately 53 percent of married women participated in the labor force, and 42 percent of widowed and divorced women were employed in 1984.[3] Some 52 percent of married women and 68 percent of divorced women with preschool-age children were employed outside the home.[4] Among women whose children were school age, the percentages were 65 percent and 84 percent for married and divorced mothers, respectively.[5] An undeniable need for full day as well as after school child care is reflected in these figures.

The Shared Heritage program was initiated in part to provide a service for families in need of safe, caring environments for their children while, at the same time, enabling the older individual to have opportunities for meaningful social interactions and supplementary income in the familiar surrounds of their own homes and neighborhoods.

Another dimension of the program focused on building generational bridges between older and younger participants. The child would receive the experience, know-how, and wisdom of the older care giver while the adult would have the opportunity to share the enthusiasms and sense of wonder of children.

Original program plans projected an elderly care giver population of some 50 providers who would care for approximately 100 children in their homes in five Iowa counties where child care services were judged to be inadequate. Although approximately 30 retired individuals attended training sessions in preparation for program participation, only 23 women completed the training and became active in the program. Some 70 children, however, benefitted from the care they received during the course of the program in these 23 homes.

In the following sections data derivative of interviews conducted with 11 care givers are presented. Two questionnaires were utilized in eliciting this information. Items in Instrument I were designed to ascertain facts related to the care givers' lives and familial relationships. Items in Instrument II focus on more qualitative experience and attitudes. The care givers' views about child care, appraisals of various aspects of the program, and their concerns about the involvement of retired citizens with their communities are revealed in their responses to the open-ended questions. Some of the responses to questions in Instrument II are quoted in their entirety in order to provide the reader with a more in-depth view of the participants' experiences in the program.

SECTION I

The findings in this section are derived from Instrument I (Caretaker Family Background Survey). The care givers resided in three Iowa counties. The greatest number (N=7) lived in Linn County. All of the care givers were Caucasian. They ranged in age from 56 to 79. Their average age was 60. Only slightly more (N=5) care givers were widowed than married (N=4), and two women were divorced or separated

from their spouses. When husbands of care givers were present in the home, they had an average age of 64. Although the average household size for the care givers was three persons, seven of the households had two or one residents. Care givers reported an average of three adult children residing away from home, and an average of six grandchildren each.

A majority of the women (N=9) reported that they were contacted by HACAP personnel or read the HACAP advertisement about the program in the local newspaper. These information sources led to their involvement with the program. One care giver indicated that another participant persuaded her to take part, while another found out about an opportunity to work in her home with children through the job service office. Some 70 children attended the Shared Heritage Program during 1985. These children ranged in age from nine months to seven years. Care givers reported an average of five children per home. They also reported that most of these children came from families where mothers and fathers were present, where both parents were responsible for child rearing responsibilities, and for t children's financial support. A few care givers mentioned that a minority of the youngsters in their homes came from families where mothers were single parents.

Five of the care givers indicated that they had completed their high school educations, and four of the women had attended college for two years. Only two care givers had dropped out of secondary school. Among the husbands who were currently residing in the home, two had finished college while two had dropped out of high school because of the need to help their families financially. A majority (N=7) of these women had spent most of their adult lives working outside of the home in either sales, clerical, or manufacturing work. Four of these care givers reported that they had been homemakers, and that they had been employed previously in child care in their homes.

Most (N=7) of these women reported that they owned their homes. Only four reported that they were renting their dwellings. Nine of the care givers lived

in private homes and two resided in apartments. Only one woman reported any property ownership in addition to her home. Almost all of these women (N=8) stated that they either had lived in one place all of these lives, or had moved from one or two small towns to a somewhat larger community in recent years. Only one woman indicated that she had moved frequently to different regions of the country because of her husband's work. These care givers have experienced generally low mobility as children and adults. Many of them have spent most of their lives in one or two places. Six of these women indicated that family moves had been occasioned because of their husbands' work, while four reported that family considerations were reasons for going to a new place. One woman had lived all of her life in one city. The average length of residency in their current home was eleven years. The time spent in this dwelling, however, ranged from only two months to over thirty years. The care giver who reported only two months residency in her current apartment, however, had spent 27 years in her former home.

When asked about previous participation in early childhood programs, some seven women reported experience. Four of the women stated that they had not been involved in any program except for babysitting in their homes. Nine of these care givers indicated that they had been involved in school programs for young children, and ten said that they had done volunteer work when their children were attending public schools. Ten care givers reported PTA membership. Only one woman said that she had not been involved in public school activities for children because she was confined to her home to care for a retarded son. Eight of these women stated they had been involved in public school activities on a regular basis, and four reported that they had held offices in parent-teacher organizations. Seven care givers reported involvement with young people's organizations and clubs, while eight indicated support for children's groups at church.

Ten of the care givers stated that they were members of a church. Only one woman reported non-membership, and she had recently moved to a new community where she expected to become involved with a church. Among church members a majority (N=7)

of women indicated that they attended on a regular basis, while others (N=3) reported occasional attendance. Only five care givers stated that they had ever held any church leadership positions.

Almost all (N=9) of the care givers were members of social clubs or groups, and they reported that they participated in these groups on a regular basis. Only a few care givers (N=3), however, had held positions as officers in these clubs or groups. Two women stated that they were members of political or civic organizations during past years, but that they had participated only occasionally. Neither care giver had held an office in a civic or political group. None of these women had been members of an occupational organization,e.g., a union or similar association, during their work outside of the home.

When these women were asked why they had decided to participate in the Shared Heritage Program, the majority (N=7) reported that they liked to care for young children. A minority (N=3) stated that they needed extra income, and one woman said she wanted to keep busy and have more activity in her life. A second order priority for these care givers included similar responses, i.e., some three women stated that caring for young children was important to them, while another three reported that they wanted to help young families who needed child care. Keeping active was a secondary reason for two care givers, while the nutrition program, assistance of the HACAP personnel, and extra income were choices voiced by the remaining three participants. Third order reasons for program involvement reflected similar response patterns. Enjoying caring for children was the motivation for program participation given in ten of the responses to these questions. Six care givers suggested that helping families who needed child care and earning extra income were important factors that influenced their decisions to take part. Five women reported that the program enabled them to keep busy and feel useful.

Seven care givers indicated that they had not had any training in early childhood development or education other than the sessions provided through this program. Three care givers had studied early education in college, and one reported child care study in high school home economics classes. When asked if certification in child care

was important to them as program participants, six care givers responded affirmatively. One care giver stated that she was already certified by the state, while the remaining four women were not concerned about having any certification.

Conclusions I

The women who participated as care givers in the Shared Heritage Program shared a number of common demographic characteristics. All of them had been or were currently married. Most of them were in their late fifties to middle sixties in age. A majority of them either lived alone or with a spouse. Although the size of their immediate families ranged from one to seven children, most of them had only two offspring. All but one of these care givers were grandmothers, and they stated that they had had a great deal of experience caring for grandchildren who lived nearby. Five of these care givers had from nine to thirteen grandchildren. Having an average of five Shared Heritage Program children in their homes obviously posed no difficulty for grandmothers who were accustomed to the frequent visits of large numbers of grandchildren.

Most care givers had completed high school and some had attended college. Although these women grew up in a time when most women were full-time homemakers, a majority of them had worked for many years outside the home.

Familial and friendship networks were generally stable and long-lived for a majority of these women who had spent their lives in one or two geographic places. Most of the care givers owned their own homes, and many of them had lived in their present dwellings for over twelve years.

Previous participation in early childhood programs either in church or social settings was a common experience shared by most of these women. Public school involvement was expressed by all but one care giver. Support for and work with young people's groups was mentioned by many of these women.

These care givers were predominantly church members and church goers. They were also actively involved in social groups or clubs. Few women, however, had ever been involved in political or civic associations. None of them had belonged to an occupa-

tional organization.

Reasons for program participation were primarily child centered, i.e., enjoying children, or liking to work with children. Helping families, earning extra income, and keeping busy were also important considerations that resulted in program participation.

Although previous training in early childhood development/education was infrequently reported, all of these women expressed positive feelings about the training sessions provided through Shared Heritage. A majority of them said that they would like to have child care certification.

It is apparent that most of these women are very active, involved with their own families and communities, and that they have willingly accepted the additional responsibility that child care entails. Most of them have long histories of work both as homemakers and as wage earners outside of their homes. Volunteerism in various school and church programs for young people was also a common experience for most care givers.

SECTION II

Instrument II (Shared Heritage Questionnaire) was designed to give the care givers the opportunity to express their views and attitudes about the Shared Heritage Program, the benefits of the program for the children participating, their communities, and opportunities for retired individuals in those communities. The questions were structured, but the responses were open-ended or unstructured.

Categories for each of these open-ended responses were determined by a content analysis of each item. Analyses of the responses to the twenty-six items was made for these eleven care givers. Category order reflects the frequency of response made by these care givers in responding to that particular item, i.e., the response most frequently given by these care givers will be presented first.

All care givers (N=11) agreed to taped interviews on Instrument II. Subsequent to the administration of this instrument the responses were transcribed.

Analyses of the responses of these care givers by item categories--that is, the percentages of responses in separate categories for each question--will be

presented first. Following this section the complete answers of some of the care givers will provide greater insight into their thoughts about the various topics addressed by the questionnaire.

Responses of the Shared Heritage Care Givers (N=11)

Item 01 Why did you decide to take part in the Shared Heritage program?

Some 91 percent of the care givers reported that they became involved with the program because they liked to be with children and work with them. Fifty-five percent of these care givers also stated that the financial incentives of the program motivated them to become participants. These responses were following by the categories of helping families with children (45 percent), support from the HACAP personnel (36 percent), something to do to keep active (27 percent), and responses that were articulated only one time, e.g., helping to address a community need, and being able to work at home.

Item 02 What do you think are the good things about the Shared Heritage program?

Fifty-five percent of the care givers indicated that the assistance of the HACAP personnel in recruitment, providing additional financial help with the nutrition program, and the toy lending library were the best things about the program. Some 45 percent of the care givers indicated that the program's best feature was its benefit to children, while both the categories of stability of child care for families and the care giver's sense of personal usefulness were expressed by 27 percent of the interviewees.

Item 03 What are the weaknesses of the Shared Heritage program?

None of the care givers reported any weaknesses of the program, and they were unanimous in their praise of the staff and in their support of the families who participated.

Item 04 What is the main purpose of the Shared Heritage program?

Fifty-five percent of the care givers stated that the program's main purpose was to help families who needed child care. Both of the categories of bringing older and younger people together and providing safe environments for children were expressed by 27 percent of the respondents. Fewer care givers (18 percent) indicated that the program's main purposes were learning opportunities for children and incomes for older people.

Item 05 What should the children gain from the program?

Forty-five percent of the interviewees stated that love and understanding as well as safe/secure environments were the main benefits for children. Some 36 percent of these care givers also reported that the program would help children to become better socialized, learn good eating habits, share the experiences of older people, and acquire manners and proper decorum.

Item 06 What do you hope to gain from the program?

Sixty-four percent of the care givers indicated that their enjoyment in being with children was the main benefit for them. A sense of being useful was expressed by 55 percent of these women. The idea of learning with the children was reported by some 45 percent of the care givers, while 36 percent said that knowing that they helped families and being active were what they hoped to gain from their participation.

Item 07 Have any of your ideas about caring for children changed over the past several years?

Forty-five percent of the women reported that they had learned new things as a result of participating in the Shared Heritage training sessions. Some 36 percent suggested that children from smaller families learned to share less quickly than those from larger families so you must teach them. The two categories of a need for more tolerance when working with very small children and the need to be relaxed when teaching

children were expressed by 27 percent of the respondents.

Item 08 Did you gain any new insights about child care during the training sessions provided by the Shared Heritage staff?

Sixty-four percent of the respondents stated that new materials on child training had helped them as care givers subsequent to the training sessions. Some 45 percent indicated a heighted sense of confidence knowing they had support of the program staff. Twenty-seven percent expressed the idea that their recognition of the need for more patience in trying to teach children was part of a new awareness about child care.

Item 09 How do children learn from adults?

Fifty-five percent of the interviewees reported that children copy what adults say or do. Some 45 percent stated that children learn by listening to adults. The categories of learning by adults teaching them and through playing games with adults were verbalized by 27 percent of the care givers. Only one respondent mentioned that children learn when they are disciplined for misbehaving.

Item 10 How do adults learn from children?

Forty-five percent of the care givers stated that adults learn patience by working through problems with children. Some 36 percent said that adults learn about human growth and change by just observing children. Twenty-seven percent of the women said that adults can gain new knowledge by reading to children, and that older people can learn to be more open-minded by being around children who are trusting and without prejudices.

Item 11 What would you say about your relationship with the Shared Heritage training staff?

Seventy-two percent declared that the staff gave helpful support whenever it was solicited. Another 55 percent of the responses suggested that the association with the training staff during the early months of the program was most beneficial. Some 36 percent of these women indicated that the staff was receptive to suggestions and new ideas, and that they were willing to help if any problem arose.

Item 12 What would you say about your relationship with the parent(s) of the child(ren) you care for in your home?

Fifty-five percent of the care givers reported that they were friends with the parents of the children in the program. Some 45 percent said that they felt they were also parenting the young mothers and fathers who brought their children for child care. Thirty-six percent said that the young mothers especially needed an older women with whom she could discuss difficulties her children might experience in play or learning activities.

Item 13 Have you noticed any changes in the children since they have been coming to your home for child care?

Forty-five percent of the women observed that children were better socialized in their interactions with other children and with adults. Some 36 percent noticed that the children were becoming more independent and able to do things for themselves. Twenty-seven percent stated that the children were learning to share with others and were generally better behaved since coming to the program.

Item 14 Do you think the children's participation will make any difference in elementary school?

Most (72 percent) of the care givers reported that the children would get along better with others in school after having experienced the Shared Heritage program. Some 55 percent of the respondents stated that the children would be able to learn faster since they were spending a lot of time with books in the care givers' homes. A few of the women (18 percent) believed that the children would be more skillful in music and games because of the program experience when they went to school.

Item 15 What does the Shared Heritage program provide for the children's families?

Eighty-two percent of the respondents said that the program provided a safe place for the children of the families. The parents could have confidence in the safety of the environment where their children received care. Some 55 percent of

the care givers stated that the families benefitted from the improved behavior of their children in the program.

Item 16 What does the program provide for the community?

Some 64 percent of the women stated that the community benefitted from having its children in a loving, safe environment. Another 45 percent of the responses mentioned the community benefit for working mothers who could concentrate on their work because of their confidence in the good child care of the program. Twenty-seven percent of the care givers reported that the program prepares children for better socialization and adjustment which will ultimately benefit their communities.

Item 17 Who generally provides care for the children of working mothers in your neighborhood?

Fifty-five percent of the care givers indicated that other young mothers who stayed at home helped care for the children of working mothers. Some respondents (36 percent) reported that grandparents and day care centers provided care. Others (18 percent) said that they did not know who provided care.

Item 18 What do you think about the child care provided for working mothers in your area?

Forty-five percent of the interviewees voiced the concern that there was insufficient safe care for very young children. Some care givers (27 percent) stated that consistent child care posed a difficulty for young families in the area.

Item 19 What is a community?

Most of the respondents (82 percent) stated that a community was really people who shared the same values. Some 55 percent of the care givers said that a community couldn't exist without people working together to make things better. A few (18 percent) of the women defined their communities using geographic parameters.

Item 20 How would you describe your community?

Sixty-four percent of the care givers said their communities were good, safe places to live. The categories of friendly and warm towns and mostly concerned citizens were reported by some 45 percent of the respondents. Two women said that their communities were progressive places to live. Only one care giver expressed any negative sentiments about her community.

Item 21 What services (facilities) are available to you in your community?

Sixty-four percent of the interviewees mentioned the recreational facilities and parks in their communities. Some 55 percent of these care givers reported that there were cultural and educational opportunities in their environments. Three women (27 percent) commented on the medical facilites and churches that were present in their communities.

Item 22 What organizations are available to you in your community?

Seventy-three percent of the women reported that there were many church groups in their communities. Some 55 percent of these respondents said that cultural, recreational, and library groups were numerous. A few (18 percent) mentioned the availability of social clubs and senior center associations.

Item 23 Are there opportunities for retired individuals to become involved in community activities?

Almost all (82 percent) of the care givers indicated there were many activities for retired individuals. Seventy-three percent of the respondents suggested the availability of church groups and programs serving handicapped and home-bound citizens.

Item 24 Do you think that retired people want to be involved in community activities?

Fifty-five percent of the care givers indicated that most retired people want to be involved in their communities. A few women (27 percent) expressed the concern that too many older people do not take the initiative to become actively involved in groups, and that they spend too much time in their homes rather than out with others.

Item 25 Which retired people in your community would be most likely to be interested in a program like Shared Heritage?

Sixty-four percent of the care givers stated that people who like children would be most appropriate for such a program. Some 45 percent indicated that individuals who have raised a family and who are now widowed would be good prospects. Several respondents (36 percent) suggested that people who are active, healthy, and want to do useful things for others would be good care givers. Twenty-seven percent of the interviewees indicated that people who are outgoing as well as patient should enjoy participating in a program like Shared Heritage.

Item 26 Do you have any comments that you would like to make about your involvement with the program?

Eighty-two percent of the care givers stated that the program made them feel useful to their communities. Sixty-four percent of these women also indicated that the program was a great benefit to the children in many ways. Two care givers (18 percent) reiterated the importance of the toy lending library provided by the program in helping the children to learn new things and play new games.

The complete responses of some of these care givers appear on the following pages. These comments follow the separate items of Instrument II. The number of commentaries does not indicate any hierarchy of importance or significance. The complete answers do provide a more in-depth view of the care givers' reactions to and appraisals of the program.

Item 01 Why did you decide to take part in the Shared Heritage program?

Care Giver Because I wanted something to do and some way to help people in my town.

Care Giver Because I felt that I had something to offer the program. Being a mother I know how hard it is to get good care for your children if you have to leave home to go to work.

Item 02 What do you think are the good things about the program?

Care Giver Well, I like the suggestions that they give on how to get started and the help in finding families who need care. I like the toy lending library, and, of course, the child food program is helpful. The program provides supplementary funds for better child nutrition so I can purchase things for the kids.

Care Giver I think it's giving the children an opportunity to mix with other children. It helps them get out and see what is happening in the larger world beyond their homes. I think it prepares them for school and church and how to get on better in their society as they grow.

Care Giver I like the training, and I like the idea of support from the Shared Heritage staff if I should need them. I like the toys in the lending library because they are mostly educational toys.

Item 04 What is the main purpose of the Shared Heritage program?

Care Giver Well, it is a lot of things as far as the value to the families. This program gives youngsters a chance to know older people since the extended family now is almost imposible for people who are moving from one place to another. Some children hardly ever see their grandparents. Youngsters need contact with a grandparent-type person even if that person is not related to them.

Care Giver A lot of younger people have children of their own and they are involved with their children and spend very little time with their parents. We grandparents get lonely and miss our own kids and grandkids if they live far away. We can also be refreshed and not as cross with the children as their own parents are sometimes because we just see them for a part of the day. The program really gives the younger parent a break to have us help.

Item 05 What should the children gain from the program?

Care Giver The sort of life similar to what they would have at home with affection and a safe environment.

Care Giver Loving care, nutritious food, feeling secure when their parents have to be away. Knowing that there is someone who cares about them who is with them during the day.

Care Giver They should gain love and attention. They should be able to learn some of the things that we did when we were children. And we should learn some of the things that they are trying to learn as children. And if we can teach them some of the things that we did as children then maybe they can be a better grownup for it.

Item 06 What do you hope to gain from the program?

Care Giver The satisfaction of knowing that I maybe contributed to somebody else's life.

Care Giver Some type of financial security. And I think too that each child I have I learn from them too.

Care Giver I think you could go forever because the benefits would be limitless in the insight into children. The joy of seeing little children grow, the sparkle in their eyes, and to help me better understand myself in seeing myself in some of them.

Item 07 Have any of your ideas about caring for children changed over the past several years?

Care Giver Well, I've been taking care of children for over thirty years, but I could say that the training program reinforced what I already knew, but it also reminded me of some things I hadn't been really thinking about because my children are grown now. I learned more about the signs of child abuse, and haven't seen anything like this with these families, but I would know what to do if this should arise in future child care situations.

Care Giver The training program helped me a lot even though I had been caring for children for many years. I learned to see how being more tolerant and patient is necessary in teaching very young children. And since I'm alone with no real family responsibilities except for these children, I have more patience and can take a lot more time with them.

Care Giver I've learned a lot from the materials and the director of the program. But I have also learned from the parents of these children in hearing their ideas about child rearing. We exchange thoughts almost daily, and they learn from me too.

Care Giver Children I care for are from small families. They don't learn to share as much as we did as children. You have to teach them this. Also working mothers do not spend as much time with these kids, so that they can't teach them proper manners and behaviors as our mothers did who were with us all day. I spend time with this.

Item 08 Did you gain any new insights about child care during the training sessions provided by the Shared Heritage staff?

Care Giver I feel more comfortable because of some of the things I learned, and because I have a backup at the agency.

Care Giver I should say so. They brought me so much new material that I learned from and enjoyed reading about caring for children

Item 09 How do children learn from adults?

Care Giver Well, simply by being with you in conversations and listening to you. There is a difference between what their grandmothers may say and what I say, but still their grandma may live far away and I can take her place here in town with this child.

Care Giver They watch adults, listen to what we say. They like to work with us, that is, take part in whatever we are doing. They like to help out.

Care Giver They learn from talking with adults. They learn from watching what an adult may do. They also learn from experiencing love and attention. If an adult does show the child the right way to do something the child is going to learn.

Care Giver I wish I could remember the right words, but my father carried a poem in his wallet that sums up basically how I feel

I'd rather see a sermon than hear one
Your words might confuse me
I might not know what you say
But I understand what I see you do

Item 10 How do adults learn from chidlren?

Care Giver They learn by watching children, by listening to the children. We have to listen the same as we expect a child to listen and we can learn a lot. We are never too old to learn and the more experiences we have with children the more we learn from them. It's not only a child that has to learn, we do too.

Care Giver I can learn from a child by his humility, his innocence, his straightforwardness, his unpretentious way of doing things, and take some of his ways and help myself to look at things differently. We learn until we die unless we choose not to.

Care Giver You learn by being with a little child, by helping the child work through some problem. You learn patience.

Care Giver You learn through doing things with them, listening to them, and working through problems together.

Item 11 What would you say about your relationship with the Shared Heritage training staff?

Care Giver It has been really wonderful. They help you with any problems, and ask if you need assistance.

Care Giver They have been very conscientious to bring toys and learning materials here to the house, and to help with the children if I ever called on them.

Item 12 What would you say about your relationship with the parent(s) of the child(ren) you care for in your home?

Care Giver It is a warm relationship. They ask my advice, and almost treat me like they would their own mother.

Care Giver They are open with me and discuss any problems they may have. I sometimes think they need a substitute mother for their own problems.

Care Giver I have become a particular good friend to one of the single mothers. She lives a long way from her parents, and doesn't get much support for her ex-husband for her son. I have asked them over for dinner, and her little boy really loves my husband.

Item 13 Have you noticed any changes in the children since they have been coming to your home for child care?

Care Giver Some of these children come here and decide they are in control. With five or six children daily they cannot have their own way, and they have to share and get along with others. They will be much better for this when they go to school

Care Giver I have been working hard with them to teach them new words, colors, and things like that. They are anxious to learn and they love it when I read to them.

Care Giver They have learned better manners. They listen to what I say and we talk over whatever they do. They know we have rules, and that they have to consider the other children too.

Item 14 Do you think the children's participation will make any difference in elementary school?

Care Giver Well, I used to be a teacher so I just naturally want to teach them new things. They will know more than children who have been in larger day care centers because I really spend time with them individually.

Care Giver They learn to take turns in games and when we have our lunch and snacks. They also have learned numbers and colors since coming here. This will help in elementary school.

Item 15 What does the Shared Heritage program provide for the children's families?

Care Giver The benefits for parents are great since they know that the person caring for their child has been thoroughly checked out, is healthy and able to care for young children, and has an agency like HACAP to support the child care operation.

Care Giver It is wonderful for a mother to know that her child is loved, and given good supervision. It is hard enough for her to have to leave a little one and not be able to really feel confident that the place is a safe and caring environment.

Item 16 What does the program provide for the community?

Care Giver It helps the community by giving working mothers a secure feeling that their children are well cared for. This way they are better at their jobs not having to worry.

Care Giver I believe the children coming from this type of program would be better adapted to socializing with other children in school and other people in their towns. This would result in better citizens for the community when they grow up.

Care Giver I think that young families in the community really need a person they can count on to be there for them on a stable basis, not just one babysitter one day, and maybe a relative the next for child care. This program gives some real stability and continuity for child care for the families of this community.

Item 17 Who generally provides care for the children of working mothers in your neighborhood?

Care Giver It's mostly provided by other mothers who are home or neighbors or relatives. This is hard because those people aren't always available when a young mother needs child care.

Care Giver There are some nursery centers and day care facilities. But I don't know if they are all clean, safe places for children since one mother told me that her child was often sick when he went to day care, but with me he has been really healthy.

Item 18 What do you think about the child care provided for working mothers in your area?

Care Giver There are some good places with caring people, but there are often not enough checks on some homes. Also young mothers with very young infants cannot find enough care for them.

Care Giver There isn't too much available in my town, except for some people who just go to your home and baby-sit. The problem with this is that the children don't get the benefits of a program like Shared Heritage with all the toys and the healthy meals.

Item 19 What is a community?

Care Giver It is a place where people work to achieve common goals and improvements.

Care Giver It's a place where people live together as neighbors and friends with the understanding that they will help each other when someone needs help with a lot of caring.

Care Giver It has to be a place where people relate to each other well. People who care about the same things. In the past it was easier to have more contact with neighbors since women were at home more. Now you have to make an effort to go out and see people when they are not at work, but it can be done. Visiting in each others' houses and sharing recipes, things like that, was more common in the past.

Item 20 How would you describe your community?

Care Giver I think it's a warm community. There are many cultural events like concerts and plays. People are really friendly and outgoing.

Care Giver I would say it's a nice, safe place. People are friendly yet they don't interfere in your life, and they will help you if you need help.

Care Giver It is a clean, safe community. There is a nature trail near here, and I often take the children there. There are a lot of recreational things to do here, and good shopping facilities close by.

Care Giver It is a caring and close-knit community. You see a lot of fathers playing with their children in the park across the street. You almost never see the kids alone, there are always parents with them. They are nice caring people in this neighborhood.

Item 21 What services (facilities) are available to you in your community?

Care Giver We have this park and Beaver Park with animals and places like that. There is a shopping mall near here. Grocery stores and a medical center are right down the next street. It offers a lot to me.

Care Giver Well I have gained some insight just going out to the community center here. This is a progressive community. There are recreational places that are well cared for, and a senior center that is lovely. These facilities tell you something about the character of people who live here. They work hard to maintain these things. They really care about their town. The parks are wonderful for the children and so is the YW/YMCA.

Item 22 What organizations are available to you in your community?

Care Giver There are many churches and there is a community theatre . There is a nice senior center, and a really good library.

Care Giver We have a lot of clubs, the Red Cross, the community center with things for the children and adult activities.

Care Giver There are many church groups, bridge clubs, even clubs for those in the retirement homes which they surely do enjoy.

Item 23 Are there opportunities for retired individuals to become involved in community activities?

Care Giver Sure, because even for those who don't drive there is SEATS, the various programs at the Senior Center, and lots of band concerts and other events in the summer where they can get transportation.

Care Giver This town has a lot of seniors. There are many programs and meals they can go to. There are programs for the handicapped and home bound and many other things for more active retirees.

Item 24 Do you think that retired people want to be involved in community activities?

Care Giver Some do and some don't. It depends a lot on your background and how assertive you are. You know you have to go out and do these things for yourself a lot and some people retire and just disappear, and then feel sorry for themselves. They have to extend themselves to others even more when they are no longer going to a place of work every day.

Care Giver On the whole most retired people want to be involved. For some it is a case of reeducating them to take more action and become involved. But once they start doing new things, they reestablish a sense of worth and realize that their communities need their assistance and involvement.

Care Giver For the healthy older person there is no lack of things to do. Volunteerism is a meaningful way of life for many older people who do so much for this town, but some people just want you to create things for them to do. You have to take the bull by the horns and jump into things.

Item 25 Which retired people in your community would be most likely to be interested in a program like Shared Heritage?

Care Giver I think that for the elderly healthy person something like this really keeps them interested and feeling needed. They are loved by the children and they are keeping active in life. They have something to look forward to every day. Senior citizens really need a purpose for getting up in the morning and having these children depend on you gets you moving and keeps you young.

Care Giver People who are easy going and enjoy being around other people. Someone who really likes children. I would hope that older women, especially widows, would become involved in this program. They have a lot of time to give and no family responsibilities.

Care Giver People whose life histories include working with children. If you want to be neighborly or a church goer or a person who gets involved with young people you can do it. You just have to want it. Some older people have many talents they could share, and you have to persuade them. Some are just afraid they are not strong enough to take on the responsibility, but many find they are once they try working with the children.

Care Giver It's hard to put your finger on this because there are intangible qualities that people have that make them good, but I think that a person who is basically confident about the ways their families have come up ..... because if I weren't happy with my own children and the relationship I had with them, I wouldn't be any good to other people's children. So a person who has had a good warm relationship with their own kids, and feels good about her own home, can always share with other children and can profit by an experience like this one.

Item 26 Do you have any comments that you would like to make about your involvement with the program?

Care Giver Well, I feel good about the role I am playing as a substitute grandmother person to these kids. I remember that one of the highlights of my young life was going to grandma's. Well, kids today don't get that opportunity often enough. They live so far from their relatives and most of the time their world is just other little kids at the day care center or their parents at night. They need to know older people because it takes the young, the middle aged, and the old to really show what the complete process of life is all about.

Care Giver This program has really helped me to get to know other older women, young families, the Heritage staff, and mostly to share my life with these children. Each day I feel that I am doing something for other people who need it, but mostly I am helping myself.

Conclusions II

These conclusions are based on the responses of the Shared Heritage care givers (N=11).

Almost all of the care givers stated that they had become involved in the program because they liked to work with children. Slightly over half expressed the view that financial incentives motivated their participation. Other reasons were the desire to help families, the encouragement from the agency personnel, and the wish to be active and busy.

Among the benefits of the program the care givers mentioned were the recruitment and placement services of the Shared Heritage staff, the advantages of the nutrition program for the children, and the toy lending library. Care givers were positive about the program's benefits to the children and families in providing stable child care. None of the care givers verbalized any criticisms about the program.

Most interviewees stated that the main purpose of the program was to help families with child care. The care givers also stated that bringing the old and young together and providing safe environments for children were important.

Care givers cited safety, affection, good food, opportunities for socialization, and the experience of older persons among the chief benefits to the children in the program.

A majority of care givers reported that just being with the children was a primary benefit for them. A sense of usefulness, learning new things with the children, helping families, and keeping active were other things they hoped to gain from participating in the program.

Care givers expressed positive feelings about the training sessions and the new materials provided by the Shared Heritage staff. Some expressed the view that they had learned to appreciate tolerance and patience in working with young children as as result of the training sessions and discussions with Shared Heritage staff members.

A majority of care givers stated that children learn by imitation. They also reported that verbal interaction and playing games with adults helped children learn.

The women in this program often stated that working through problems with children helped them learn from the children. Others ways adults learn were through observation of children, reading to children, and interacting with children who are trusting and open-minded.

Relationships between the care givers and the Shared Heritage staff were very positive, as were the relationships with the parents of the children in this program. The care givers were especially positive about the openness of communication with both of these groups.

Most care givers reported that they believed the children would adjust better to elementary school since they had learned better manners, how to share, and gained new knowledge since involvement with the Shared Heritage program.

Primary benefits to the families of the children in this program were safety, loving care, and improved child behavior. A majority of the care givers were in agreement on these benefits.

The care givers stated that communities benefitted when working mothers had safe places for their children's care. Some women mentioned that better socialized chidlren also contribute to an improved community.

A number of respondents expressed a concern about the availability of safe environments for child care for very young children in their communities. A majority

of these care givers indicated that most of the child care in their areas was provided by young mothers who did not work outside the home, or by relatives or neighbors. The reliability of such informal child care arrangements was a concern for some of the respondents.

Most respondents conceived of communities as places where people share similar attitudes and values. A large proportion of these women were quite positive in describing their communities as safe, clean, caring places to live.

A majority of care givers reported that there were many services and facilities in the towns where they lived. Many of them mentioned the cultural and educational opportunities that were available to them.

The care givers also were positive in describing the organizations available to senior citizens and opportunities for involvement in these groups. A majority of respondents stressed the number of programs for home-bound and handicapped elders.

Most of these care givers expressed the belief that retired people want to be involved with their communities, but that they must be assertive in ensuring that involvement.

The qualities most often mentioned as desirable for care givers in a program such as the Shared Heritage venture were: liking children, not having many family responsibilities, being healthy, outgoing, and wanting to engage in useful activities. An overwhelming number of these respondents commented that their involvement in the Shared Heritage program had given them an enhanced sense of self worth and usefulness to their communities.

Notes

[1]U.S. Bureau of the Census, CURRENT POPULATION REPORTS, Series P-23, No. 127.

[2]Ibid.

[3]U.S. Bureau of Labor Statistics, Bulletin 2096.

[4]U.S. Bureau of Labor Statistics, SPECIAL LABOR FORCE REPORTS, Nos. 13, 130, 134, Bulletin 2163.

[5]Ibid.

INSTRUMENT I

CARETAKER FAMILY BACKGROUND SURVEY

Item		
001	I.D. Number	
002	County Code	1=Linn 2=Washington 3=Iowa
003	Race	1=Caucasian 2=black 3=Hispanic 4=other
004	Number of children in Heritage Program	Actual Number _____
005	Ave. No. of mos. in program of the children	Actual Number of mos. for children / NUMBER OF CHILDREN
006	Year of child's attendance	1=1984-1985 2=1985
007	Heritage program information gained through	1=another care giver 2=newspaper 3=HACAP personnel phoned 4=representative from HACAP visited 5=public school teacher/ administrator 6=minister 7=community resident 8=other
008	Age of S	Actual Age_____
009	Marital Status	1=married 2=widowed 3=never married 4=separated/divorced
010	Age of husband of S if living in the home	Actual Age_____

011 Number of persons living in the household — Actual Number_____

012 Number of Adult daughters of S not living in the home — Actual Number_____

013 Number of Adult sons of S not living in the home — Actual Number_____

014 Number of grandsons of S not living in the home — Actual Number_____

015 Number of granddaughters of S not living in the home — Actual Number_____

016 Age of the CHILD or CHILDREN in the Heritage project — Actual Age(s) _____

017 Person assuming the major child-rearing responsibilities

1=mother
2=father
3=both
4=other

018 Person assuming the major financial responsibility for the child

1=mother
2=father
3=both
4=other

019 Highest grade completed by the S

020 Highest grade completed by the husband of the S if living in the home

021 Occupation of S (now or when in the workforce)

022 Occupation of the husband (now or when in the workforce)

023 Present living quarters of the S

1=farm
2=non-farm rural
3=non-farm non-rural (dwelling in town)
4=apartment
5=other

024	House ownership	1=rent 2=own 3=other (living with relatives who own home)
025	Property ownership	0=no property 1=farm 2=non-farm rural 3=non-farm non-rural (not in open lands)
026	Mobility Index of person being interviewed (S)	sum types of moves 1=within rural counties of Iowa or within rural counties of adjacent midwestern states 2=outside rural counties in urban places or from one rural area of another state to adjacent state(s) divide by average length of time spent in each place where S resided
027	Reasons for move	1=economic 2=family 3=both 4=other
028	Number of years spent in present home	
029	Participation in early child program in the past	0=no 1=yes
030	Participation in program for school age children	0=no 1=yes
031	Volunteer at school activities for children	0=no 1=yes
032	Member in PTA or similar organizations	0=no 1=yes
033	Participation in young people's activities with civic organizations	0=no 1=yes
034	Participation in young people's activities with church	0=no 1=yes
035	Participation in young people's activities with their clubs (e.g., Scouts, etc.)	0=no 1=yes

036	Church membership	0=no 1=yes
037	Church participation	0=never 1=seldom 2=occasionally 3=regularly
038	Church leadership positions	0=none 1=vice-president/president of Sunday school group 2=secretary/treasurer 3=deacon 4=board member 5=other
039	Extent of public school participation in past years	0=never 1=seldom 2=occasionally 3=regularly
040	School leadership positions	0=none 1=vice president/president of PTA/PTO, etc. 2=secretary/treasurer 3=advisory council 4=board member 5=classroom aide 6=other
041	Social organizations	0=none Actual number_____
042	Participation	0=never 1=seldom 2=occasionally 3=regularly
043	Positions held	0=none 1=vice president/president 2=secretary/treasurer 3=director 4=board member 5=other
044	Political organizations	0=none Actual number_____
045	Participation	0=never 1=seldom 2=occasionally 3=regularly
046	Civic organizations	0=none Actual number
047	Participation	0=never 1=seldom 2=occasionally 3=regularly

048 Positions

0=none
1=vice-president/president
2=secretary/treasurer
3=director
4=board member
5=other

049 Occupational organizations

0=none
Actual number_____(this could include former membership)

050 Main reason for participation in Shared Heritage Project

1=additional income
2=like to care for children
3=need to keep busy with activities
4=help families who need child care
5=other

051 Next most important reason for participation in the Shared Heritage Project

(same code as above)

052 Third most important reason for participation in the Shared Heritage program

(use same code as above)

053 Training in early child education

0=none
Actual number of months of schooling or in-service experience _____
1=HACAP training sessions

054 Is some form of certification in child care important to you as a participation in this program?

0=no
1=yes

INSTRUMENT II

SHARED HERITAGE QUESTIONNAIRE

1. Why did you decide to take part in the Shared Heritage program?

2. What do you think are the good things about the program?

3. What are the weaknesses of the Shared Heritage program?

4. What is the main purpose of the Shared Heritage program?

5. What should the children gain from the program?

6. What do you hope to gain from the program?

7. Have any of your ideas about caring for children changed over the past several years?

8. Did you gain any new insights about child care during the training sessions provided by the Shared Heritage staff?

9. How do children learn from adults?

10. How do adults learn from children?

11. What would you say about your relationship with the Shared Heritage training staff?

12. What would you say about your relationship with the parent(s) of the child(ren) you care for in your home?

13. Have you noticed any changes in the children since they have been coming to your home for child care?

14. Do you think the children's participation will make any difference in elementary school?

15. What does the Shared Heritage program provide for the children's families?

16. What does the program provide for the community?

17. Who generally provides care for the children of working mothers in your neighborhood?

18. What do you think about the child care provided for working mothers in your area?

19. What is a community?

20. How would you describe your community?

21. What services (facilities) are available to you in your community?

22. What organizations are available to you in your community?

23. Are there opportunities for retired individuals to become involved in community activities?

24. Do you think that retired people want to be involved in community activities?

    If so, what kinds?

    If not, why?

25. Which retired people in your community would be most likely to be interested in a program like Shared Heritage?

26. Do you have any comments that you would like to make about your involvement with the program?

PART time LPN/RN to work in 26 bed unit for multiple handicapped children and adults. Would require every other weekend with rotation on 6-2 and 2-10 shifts. Apply in person, Cedar Rapids Care Center Business Office, 1030 5th Ave. S.E. Lower Level, Mon. thru Fri.

CARRIERS

Adults or teenagers
Cedar Rapids N.E. area
To deliver The Gazette
Earn $20 to $50 per week
Call 398-8333
Equal Opportunity Employer

PROVIDE CHILDCARE in your home: Shared Heritage Childcare Project is looking for people 55 years and over interested in caring for children at home. Self employment opportunity with support services offered. Call Chris Carman, HACAP, 366-7631. Equal Opportunity Agency.

37 Child-Elderly Care

DO YOU NEED CHILDCARE? The Share Heritage Childcare Project refers families needing childcare to experienced registered care providers. Age 55 and over. Call Chris Carman, HACAP 366-7631. Equal Opportunity Agency.

LOVING Childcare with a personal touch. Wanting 2 pre-schoolers to watch in my N.E. home. Doctors references. Hot lunch. Separate playroom. Fenced yard. Across from Noelridge Park. 375-9568.

REGISTERED CHILDCARE
Preschool and Food Program
Days, nights, infant/preschool age only. References. Phone 377-7219.

LICENSED BABYSITTING
In my home. Newborn to 3 years. N.E. side and Hiawatha area. References. 378-1948.

QUALITY CHILDCARE: Any age, any shift, full/part time. Done in my N.E. home. Reasonable rates. Excellent references. 395-7267.

EXPERIENCED childcare my S.W. home. Close to interstate, fenced yard. Playmates 365-2749.

DAYCARE HOME
Planned activities, hot meals, lots of TLC. 364-4675.

BABYSITTING: my Marion home, references, experienced. 377-2936.

SITTERS Unlimited: house sitting, sit with elderly. 366-5211.

LICENSED SITTER
Northbrook area. 393-2333.

MINISTER'S wife will babysit-my N.E. home newborn-6 mo. 393-0150.

CHILDCARE My NE home. Pierce-Adams school area. 364-3097.

Hundreds of our readers turn to Classified every day searching for one particular item. Make sure your ad is here!

Shared Heritage

Child Care Project

HELP WANTED:

New HACAP child care project looking for persons age 55 or older to provide loving, safe, educational child care at home. Paid position: part-time (after school) or full-time. Car needed. Shared Heritage offers a training program, liability insurance, a toy lending library and reimbursement for meals.

Call: 366-7631 or 1-800-332-5289

Write: HACAP
Box 789
Cedar Rapids 52406

Shared Heritage

Child Care Project

The Shared Heritage Child Care Project is a unique child care program set in the homes of mature, experienced care providers, age 55 and older. The program offers:

- An opportunity for children to develop a warm relationship with an older person and to receive loving care in a small group situation.

-Full day child care and after-school care in Iowa, Benton, Jones and Washington Counties. Transportation for after-school care is coordinated with the local school districts.

- An educational program that introduces children to rural heritage and involves them in some traditional activities such as baking, gardening, simple chores, traditional stories and songs,etc.

-Registered family day care homes, visited periodically by professional staff.

- Nutritious meals approved by the Child Care Food Program.

- A child development training program for care providers.

FOR MORE INFORMATION CALL:

Benton County	472-4761
Iowa County	668-1812
Jones County	462-4484
Washington County	653-3722

Toll Free Number: 1-800-332-5289

OR WRITE:
HACAP - "Shared Heritage"
P.O. Box 789
Cedar Rapids, Iowa 52406

SHARED HERITAGE means two generations coming together:

The Shared Heritage Child Care Project brings mature, experienced care providers (age 55 and over) together with preschool and school-aged children in rural areas where child care is not readily available.

The project builds upon "grandparent - grandchild" type of relationships to create a unique, high quality child care program.

QUALITY CARE:

In the Shared Heritage Program older persons care for children in their own homes.

They are visited on a periodic basis by a professional support staff.

The care providers have all gone through a child development/ child safety training program. Each care provider has also passed a child abuse record check. References are available for parents to see.

One of the most exciting aspects of the program is its "Heritage Component" which introduces children to rural heritage and involves them in a variety of traditional learning activities, such as baking, gardening, nature crafts, folktales and songs.

Meals served to children are well-balanced and meet the guidelines established by the U.S.D.A's Child Care Food Program.

RURAL CHILD CARE:

Child care can be difficult to arrange in many Iowa towns and rural areas. The Shared Heritage Program is specifically aimed at six rural counties:
Iowa, Benton, Jones and Washington, Linn, Johnson.
The care providers are long time members of the communities that they serve — they are friends and neighbors who enjoy working with children.

FULL-DAY CARE:

Parents can enroll their preschool age children in the program, full time, 5 days a week, if they choose. Part-time care is also available.

BEFORE/AFTER-SCHOOL CARE:

Care is provided for elementary age children who need someone to be with them before and after school. Transportation to the care provider's home is coordinated with the school district's bus system.

FOR INTERESTED OLDER PEOPLE:
I would like to find out more about becoming a child care provider with "Shared Heritage".

Name: _____

Address: _____

Phone: _____

Send to: HACAP-"SHARED HERITAGE"
P. O. BOX 789
CEDAR RAPIDS, IOWA 52406

Or call TOLL FREE:
1 - 800 - 332 - 5289

Shared Heritage means:

- **Giving the best of our traditions to a new generation:**

Growing up in Iowa has been a special experience for generations of children. Our state has a heritage of caring about children that is characterized by:

- an emphasis on families and warm adult-child relationships
- fun activities connected with Iowa's seasons and community traditions
- a special concern for education and learning.

The goal of the Shared Heritage program is to continue this heritage with a new generation of families, many of whom need child care services.

- **Supporting the people who care for children.**

The Shared Heritage Child Care Program serves children by offering support services to local family day care homes. It is estimated that day care homes provide 80% of the child care services in Iowa. Our program gives day care home providers additional resources to assist them in the important work they do. The services we offer include:

- **The Child Care Food Program:** a USDA program locally administered by HACAP to help home providers meet the nutritional needs of children. This program has been very valuable to home providers and is a required aspect of Shared Heritage. Additional information on the food program is available upon request.

- **A Child Care Lending Library:** toys, learning games, car seats and other equipment for home providers to check out and use with the children they care for. Periodically, local businesses donate "give away items" like colored paper, cloth and stickers for creative uses.

- **Child Care Workshops:** these sessions give care providers a chance to come together to share ideas and learn about new activities and approaches they can try with children. A wide range of topics are covered in the workshops.

- **Technical Assistance:** information is available to help new home providers get started, set up basic recordkeeping, and meet state requirements. We also inform home providers of other community resources that may be useful to them.

- **Home Visits:** Shared Heritage staff are available periodically to visit participating day care homes and introduce new activities and materials to children and care providers. These sessions are fun and educational for everyone!

- **Other Services:** Participating homes that meet specified standards may also be eligible to receive other services like group insurance rates and listing for child care referral.

In locations where other organizations and agencies also work with home providers, every effort is made to coordinate services. We encourage agencies to work together to meet the needs of children, families and day care providers.

- **Care in rural and urban areas:**

The Shared Heritage Child Care Program serves a five county area (Linn, Iowa, Jones, Benton, and Washington.) We work with home providers in small towns, rural areas and larger communities.

- **Different generations coming together:**

The Shared Heritage Program is open to all day care home providers regardless of age. We make a special point of including active older people who often have much to offer young children.

For more information on THE SHARED HERITAGE CHILD CARE PROGRAM call:

366-7631 (Cedar Rapids)
or
1-800-332-5289 (Toll free from other counties).

HACAP NEWS

HAWKEYE AREA COMMUNITY ACTION PROGRAM
320 11TH AVENUE, SE, P.O. BOX 789
CEDAR RAPIDS, IA 52401

DON MANICCIA, EXECUTIVE DIRECTOR

FOR MORE INFORMATION CONTACT:

Suzanne Blouin
Administrative Services Manager
(319) 366-7631

FOR RELEASE JANUARY 11, 1985

HACAP RECRUITING 55 YEAR OLDS FOR CHILD CARE PROJECT

HACAP is looking for persons age 55 or older for the Shared Heritage Child Care Project.

The project will enable qualified individuals to earn additional income by caring for children in their homes. Participation can be parttime (after school) or fulltime.

The Shared Heritage Project currently operates in Linn, Benton, Iowa, Jones, and Washington Counties.

HACAP will offer child care recruits a training program, liability insurance coverage, a toy lending library, and reimbursement for children's meals.

Shared Heritage is a demonstration project designed to develop home-based child care opportunities for persons 55 years or older.

For more information, please contact Chris Carmen at 366-7631.

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38.

Attachment 7

HACAP NEWS

HAWKEYE AREA COMMUNITY ACTION PROGRAM
320 11TH AVENUE, SE, P.O. BOX 789
CEDAR RAPIDS, IA 52401

DON MANICCIA, EXECUTIVE DIRECTOR

FOR MORE INFORMATION CONTACT:

Suzanne Blouin
Administrative Services Manager
(319) 366-7631

FOR RELEASE APRIL 10 - 19, 1985

HACAP SHARED HERITAGE RECRUITING CHILDREN

HACAP's Shared Heritage Program is referring parents needing childcare in Cedar Rapids, Palo, Atkins, Belle Plaine, Washington, and Williamsburg.

Childcare will be offered by persons over age fifty-five in their homes. All participating homes are registered with the State of Iowa. References are available. Support services for the childcare homes are provided by HACAP.

The Shared Heritage Program is a demonstration project funded by the U.S. Department of Health and Human Services. Its goal is to facilitate a childcare system built upon the beneficial nature of the relationships between young children and older people.

For more information, please call Chris Carmen at HACAP, 366-7631, or tollfree 1-800-332-5289 in rural areas.

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Attachment 8

HACAP NEWS

HAWKEYE AREA COMMUNITY ACTION PROGRAM
320 11TH AVENUE, SE, P.O. BOX 789
CEDAR RAPIDS, IA 52401

DON MANICCIA, EXECUTIVE DIRECTOR

FOR MORE INFORMATION CONTACT:

Suzanne Blouin
Administrative Services Manager
(319) 366-7631

PUBLIC SERVICE ANNOUNCEMENT

HACAP NEEDS TOYS

HACAP is accepting donations of new and used toys and children's books.

The toys and books will become part of a toy lending library for individuals providing childcare in their homes.

All donations are tax deductible.

Toys may be brought to HACAP at 320 11th Avenue, SE, in Cedar Rapids.

For more information, please contact Chris Carmen at 366-7631.

###

HACAP needs toys, children's books

Hawkeye Area Community Action Program (HACAP) is accepting donations of new and used toys and children's books.

The toys and books will become part of a toy lending library for individuals providing child care in their homes. All donations are tax deductible.

Toys may be brought to HACAP at 320 11th Ave. SE, Cedar Rapids. Further information is available from Chris Carmen at 366-7631.

Shared Heritage Child Care Program
Affiliate Care Provider Application

Name: _____ Social Security #: _____

Address: _____ County: _____

Date of Application: _____ Phone: _____
(If rural route, please give directions on reverse side of application form.)

Previous Experience with Children (includes raising own children, babysitting, Sunday school, job experience, etc.)

	Type of Experience	Dates
1)		
2)		
3)		
4)		

Previous Work Experience(list past three employers, beginning with most recent)

	Employer	Dates of Employment
1)		
2)		
3)		

Special interests, abilities, hobbies etc.:

References:
Please list 3 persons (non-relatives) who can provide both a written and telephone reference concerning your work with children. Written references will be available for parents to see.

1)Name: _____ Phone: _____
Address: _____ Relationship: _____
2)Name: _____ Phone: _____
Address: _____ Relationship: _____
3)Name: _____ Phone: _____
Address: _____ Relationship: _____

Do you have a valid Iowa driver's license? _____ Yes _____ No

Do you have a car in good operating condition? _____ Yes _____ No

(A car is helpful, but is not a firm requirement)

Reference Check - Shared Heritage Child Care Project

Name of Reference:_____

Name of Applicant:_____

The Shared Heritage project is a unique child care program set in the homes of older persons in Iowa, Benton, Jones and Washington Counties. Your name has been given to us as a reference for the applicant listed above. We appreciate your honest reaction to the questions asked. You may decide whether you wish to have this reference check kept confidential or made available to parents. We realize that some sensitive matters are raised, but feel they need to be addressed for the well-being of the children and older people involved. Thank you for your cooperation!

Check One: _____Please keep my response confidential

_____You may make this reference available for others to see

How long have you known this applicant?

What is your relationship with her?

Have you ever observed her with children? _____Yes _____No

Please describe the kind of relationship she has with children:

Do you feel this person would do a good job caring for children in her home? Please explain.

Please give any other general remarks about this applicant:

Please share your feelings about any other household members that children may have contact with (husband, grown children, other relatives, etc.):

Please answer the next questions using the following scale:

5 = Excellent
4 = Good
3 = Okay
2 = Below Average
1 = Unsatisfactory

1. How would you rate her physical ability to care for children on a daily basis?

5 4 3 2 1

2. How would you rate her emotional stability in relation to providing daily care for children?

5 4 3 2 1

3. Rate her overall ability to relate to children in a positive way:

5 4 3 2 1

4. Rate her general dependability:

5 4 3 2 1

Please return completed form to:

HACAP - Shared Heritage
P. O. Box 759
Cedar Rapids, IA 52406

Home Visit Interview #1

Name:_____ Phone:_____

Address:_____ County:_____

Over 55 Years of Age:_____

Physical Information

1. Do you have any physical restrictions that could affect your ability to work with children?

2. What medications, if any, are you currently taking?

Child Care Related

1. Why are you interested in caring for children in your home?

2. What kinds of activities do you enjoy doing with young children?

3. What qualities do you have that make you a good child care provider?

4. What are your feelings or ideas on "discipline?"

5. How would you handle a situation in which one child hits another?

6. Give 3-4 ways in which you can help children feel good about themselves.

7. Have you ever participated in a class or workshop on child development?

8. What kinds of activities would you do with a 4 year old that you probably wouldn't do with a 2 year old? Why?

9. How would you structure your day? What would your day be like if you were caring for children in your home?

10. Do you have a helpful friend or neighbor for back-up assistance?

11. How would you handle emergencies?

12. Do you have seat belts in your car for children to use?

13. Do you rent, or own your home?

14. If you rent, will your landlord object if you care for children in the home? Do you expect any problems with neighbors?

What age children would you like to care for?

_____Under 1

_____1-2

_____2-3

_____3-5

_____Over 5 - School Age

Are you interested in providing:

Full day child care 5 days per week	Yes_____	No_____	
Full day child care Less than 5 days per week	Yes_____	No_____ (Same school districts have alternate day kindergarten)	
After school care (3:00-5:30 or 6:00)	Yes_____	No_____	
Before school care (7:00-8:30 or 9:00 a.m.)	Yes_____	No_____	
Evening care (regular schedule)	Yes_____	No_____	
Occasional evening care	Yes_____	No_____	Sometimes_____
Substitute care for another care provider	Yes_____	No_____	Sometimes_____
Weekend care	Yes_____	No_____	Sometimes_____
Emergency care (while parent is in hospital etc.)	Yes_____	No_____	Sometimes_____

Are you interested in caring for a special needs child?

Physically handicapped?	Yes_____	No_____
Mentally handicapped	Yes_____	No_____

Would you be interested in caring for children in their home?

Yes_____ No_____ Sometimes_____

Are there certain times of year that you wouldn't be available? Why?

Would you be interested in caring for children along with another older person? If so, give name./Has this person applied for the program?_____

How many children would you like to care for at a time?

Family Background

Who else lives in your household? Please give names and their relationship to you.

Will they be at home while you are caring for children?

How do they feel about having children in your home?

Are there other relatives or friends who visit your home on a regular basis? Give names and relationship.

Do you have grandchildren? Do they live in the area or elsewhere?

Do you have any pets? How many and what kind?

Personal Information

1) Do you have a criminal or child abuse record?

2) Are you currently receiving treatment for alcohol, drug or mental health problems?

Evaluation Of Home Visit #1

	Poor	Fair	Good	Excellent
Physical Ability	1	2	3	4
Emotional Stability	1	2	3	4
Warmth	1	2	3	4
Overall Rating	1	2	3	4

Comments:

Day Care Home Safety Checklist

Kitchen

1. Is there adequate ventilation in the kitchen? yes no
2. Does the home have a city water supply? yes no
3. [illegible] necessary tests been performed and are on file? yes no
4. Are all [illegible]ening supplies and poisons out of reach of children? yes no
5. Is the kitchen [illegible]y? yes no
6. Are all flammables away from stove? yes no
7. Are dishes used by children free from c[illegible] yes no
8. Are unbreakable plastic glass [illegible] yes no
9. Is there enough food on hand for an emergency? yes no
10. Are plastic bags out of reach of children? yes no
11. Are perishable foods refrigerated? yes no
12. Does the refrigerator register 40° or lower? yes no
13. Are cords to frying pans, coffee pots, etc. out of reach? yes no
14. Is the garbage stored in a covered container, under the sink or out of the kitchen? yes no
15. Are all towels and curtains away from stove? yes no
16. Are all sharp knives stored out of reach of children? yes no
17. Are all hazardous electrical appliances out of reach? yes no
18. Are electrical appliances away from water? yes no

Bathroom and Bathroom

1. Are all medicines secure from access by children? yes no
2. Are all razor blades and harmful health and beauty aides secure from access by children? no
3. Is the bathroom clean?
4. [illegible]trical appliances (dryers, etc.) disconnected when not in use? no
5. [illegible] soap and toilet paper available?

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6. Is there an outside lock release for the door? yes no

7. Are Kleenex available? yes no

8. Are the exits free from obstructions? yes no

9. Are there first aid supplies on hand? yes no

Basement

1. Are combustible materials kept away from furnace and hot water heater? yes no

2. Is the door to the basement or cellar locked if not used by children? yes no

3. If children have access to basement, is it safe and free from hazards? yes no

4. Are unused appliances nonhazardous and inaccessible to children? yes no

5. If basement is used as a play area, are laundry areas and work rooms inaccessible to children? yes no

6. Are dangerous tools disconnected, out of sight and reach? yes no

Outside Area

1. Is the outside play area free of debris and contamination? yes no

2. Is the area free of any unused appliances that could be hazardous to children? yes no

3. Are clothes lines hanging high and free of loose ropes? yes no

4. Is the area free of loose boards, porch or cellar doors or stairs that need repair? yes no

5. Are garden tools and mowing equipment put away? yes no

6. Are screens and/or storm windows free from need for repair? yes no

7. Is the yard free of junked cars? yes no

8. Is the garage or storage shed locked if used for storage of hazardous tools and items? yes no

9. Is the home along a busy street or road? yes no

10. If so, is there a fenced area? yes no

General Areas

1. Are all play materials and equipment safe for children in the home? yes no
2. Is the fireplace well secured? yes no
3. Are all guns locked and out of children's reach? yes no
4. Is sewing equipment put away? yes no
5. Is the home free of peeling paint in areas accessible to children? yes no
6. Are hot radiators and pipes protected with guards? yes no
7. Is the home free of flies and other insects or rodents? yes no
8. Is the liquor cabinet locked? yes no
9. Are stairs used by children in safe condition (free from clutter, loose boards and loose carpet)? yes no
10. Are there sturdy handrails on all stairwells? yes no
11. Are all accessible outlets capped? yes no
12. Are portable space heaters out of reach an not being used while children are present? yes no
13. Are electrical outlets safe (not too many cords)? yes no
14. Are matches and lighters out of reach of children? yes no
15. Are electrical cords used correctly (not under rugs, over hooks, etc.) and in safe working condition? yes no
16. Are poisonous substances or hazardous items secure (locked) from access by children? yes no
17. Is there a smoke detector in the home? yes no
18. Is there a fire extinguisher in the home? yes no
19. Is the floor clean (swept or vacuumed)? yes no
20. Are there pets, if so are they clean and well cared for? yes no
21. Is there an adequate general play area? yes no

Name of applicant_____

Birthdate_____

Height:_____Weight:_____

Vision (with corrective glasses if worn)_____

Hearing: Can person hear normal voice tones?_____

If not, specify any problem areas_____

_____

Blood Pressure - At rest:_____

After standing 2 minutes_____

Heart Rate_____

Respiratory problem_____Asthma_____Emphysema_____

Is there any known existing heart condition or history of heart disease?_____

Stomach, liver, gall bladder or intestinal problems?_____

_____

Any dizziness, fainting?_____

Any convulsive disorder?_____

Diabetes, thyroid or other endocrine disorders?_____

Allergies_____Blood disorders_____

Are there any hernia or back problems that would prohibit lifting small children?

_____

Is this person taking any medications regularly?_____

List:_____

Excessive use of alcohol or tobacco?_____

Please do T.B. test if not done during the past year:

Date_____Results_____

In your opinion does this person have any physical or mental problems that would prevent her/his performance of the described duties?_____

_____

_____

Signature of examining physician

_____

Date

Home Child Care Professionalism

Caring for children is important work and a great responsibility. A good child care provider makes use of both good teaching and parenting skills in working with children. Traditionally, caring for children has been a low-status job which many people refer to as "babysitting." While there is nothing wrong with this term in itself, we believe that people who care for children deserve more recognition for their hard work. We prefer the more accurate and professional term "child care provider."

Professional child care providers approach their responsibilities in a conscientious manner, not always found in a more informal "baby-sitting" situation. Here are some differences between high quality and lower quality care:

	High Quality Care	Lower Quality Care
Basic Attitude:	A good care provider approaches child care as important work. Makes an effort to think about all aspects of the job in a professional way	This care provider has low esteem for her work and feels that "anyone can do it." Hasn't considered how to make the care more educational or professional.
Children's Activities:	A variety of activities are provided for children, including free play, learning games, stories, songs, art activities, and group times. The care provider plans and prepares for activities in advance. The T.V. is only used for educational shows like "Sesame Street" - and even then sparingly.	In lower quality care, the kids may have a few toys to play with, but there are no planned activiti The T.V. may be on for much of th day. This lack of stimulation results in behavior problems and slower development in the childre
Safety:	A safety check is made of the home for potential hazards. Care provider continues to be aware of safety and health factors when children start attending. A preventative approach is taken.	Babysitter assumes the home is safe, but hasn't made a careful check. May not be aware of potential hazards.
Meals:	The high quality care provider prepares well-balanced meals that have been planned in advance. A sufficient amount of food is served and good sanitation is used.	The care provider cooks whatever is on hand. May not realize t basic nutrition or adequate amou Kitchen may be unclean.

	High Quality Care	Lower Quality Care
Parents:	A positive relationship is developed between the care provider and the parents. A written agreement is made. Care provider keeps parents informed about daily activities and events.	Relationship with parents may be rocky. No agreements were made in advance. Little information is given to parents about the child's day.
Records:	Complete intake and emergency records, are kept in a safe place. Physical, immunization and accident reports are kept.	Insufficient records, if any, are kept. Babysitter may just hav name of parents and a phone number
Schedule:	A flexible daily schedule is followed that meets the needs of children and care provider- includes times for a variety of learning activities, nap, lunch and outdoor play.	If a schedule is followed, it is based upon adult needs rather than the child's. There are large blocks of time with no engaging activities going on.
Home Environment:	The home is physically arranged to encourage safe, positive play. Toys and learning materials are readily available to children. A general play area is set up for kids.	No changes have been made in the arrangement of the home. Toys are heaped in a toy box and are hard for children to see. There is no specific place for kids to play.
Field Trips:	Outings are seen as an educational experience. Care provider even talks about routine trips to the store, doctor, etc. with the children before, during and after the visit.	Kids sometimes go places with the babysitter, but they are mostly "extra baggage" and aren't actively involved in the outing.
Adult Supervision and Interaction:	Children are always within sight of the care provider. She interacts with them in a warm and positive way.	Adult only loosely supervises kids. Mostly interacts with them when there is a problem - then just to yell at them to "stop."
Confidentiality:	Treats information about children and their families confidentially - it goes "no further."	Private information about children and their families gets passed onto neighbors and friends. Rumors get started.

	High Quality Care	Lower Quality Care
Infant Care:	Care provider spends a significant amount of time holding, talking to and playing with the baby. She has knowledge of developmental levels. A good adult-child ratio is maintained.	Baby spends a lot of time in crib. Bottle gets propped up for feedings. Babysitter has so many other children that baby doesn't get proper care
After School Care:	Kids come back from school to a warm and fun environment. Activities are informal, but involve adult conversation and contact.	Kids mostly watch T.V. and are left to themselves. They generally are ignored by the adult.

TRADITIONAL CHILDHOOD ACTIVITIES

Things children have liked to do for generations!

Arts/Crafts:

Leaf tracings
Noodle necklaces
Drawing w/ chalk on sidewalk
Natural dyes (onionskin, cranberry)
Simple sewing projects
Making paper dolls / paper doll chains
Making snowflakes
Cutting and pasting (use old magazines)
Drawing - crayons and pencils
Playdough

Dramatic Play ("Pretending") :

Tea Parties
Making newspaper hats
Playing w/ empty boxes
Playing w/ blankets
Raking leaves into "houses"
Playing post office w/junk mail
Make tin-can telephones
Play w/ old dress-up clothes
Play store
Play restaurant
Play family
Use puppets
Play w/ dolls or stuffed animals

Cooking/Food Experiences:

Making cookies
Making bread
Making muffins
Making corn bread
Maing applesauce
Making soup
Making butter
Set up lemonade stand
Play restaurant

Musical Activities:

Make instruments: kazoo, drum, rattles, etc.
Listen to radio, records
Listen to school band
Singing together

Woodworking:

Hammering nails
Sawing scrap wood
Making: simple boat, bird house, airplane

Games:

Simple Card Games
Jump Rope
Treasure Hunts
Ring Around the Rosey
London Bridge
Hopscotch
Tiddley-winks
Red Rover
Mother May I
Simon Says
Jacks
Dominoes
Board Games

Number/Math:

Playing store
Counting money
Card Games
Collections (counting, classifying)
Selling lemonade
Dominoes

Field Trips:

To: Farm, Post Office, Downtown, Park, Dime Store, Grocery, Library, Marching Band Practice, Athletic Team Practice, Dairy, Doctor, Picnic

Language Experiences:

Storytelling
Fingerplays
Jump Rope Rhymes
Tongue Twisters
Riddles and Jokes
Read books
Keep Diary
Make books
Autograph books

Large Muscle Activities:

Tire Swing
Obstacle Course
Riding Trikes and Bikes
Footraces
Playing at park
Jumping on old mattress
Tin Can Stilts

Traditional Childhood Activities continued:

Science / Sensory:

Gardening
Care for houseplants
Flower drying and pressing
Feed birds, squirrels, etc.
Make bird feeders
Leaf tracings
Catch bugs
Start collections: rock, shell, etc.
Sand play
Water play
Play at stream
Pick berries
Fishing
Care for a pet
Play w/ magnets
Make mud pies
Find animal tracks

Name of Participating Organization_____

Address_____

Contact Person_____Phone_____

HERITAGE ACTIVITIES

What were your favorite activities when you were a child?

Did you make any toys or games as a child? What were they?

What were your favorite games to play with other children? Describe the games.

Did you do any simple cooking projects? What were they?

Did you do any simple woodworking or craft projects? What were they?

What were your favorite riddles or jokes?

Did you do anything to earn spending money when you were a child?

What were your favorite songs?

Were there special activities you did during certain seasons or times of the year?

Did you have chores or household jobs to do as a child? What were they?

Check here if you would like to have further involvement with Shared Heritage:

____yes ____no

Thanks for your ideas. Please return to:

HACAP - Shared Heritage
Box 789
Cedar Rapids, Iowa 52406

Rural day-care centers take shape in Iowa

by William Mueller

FRANCES McGaffey is in business for herself. It started as a suggestion by a woman who just thought she might be interested. "Of course, maybe you don't qualify," the person added "You have to be over 55."

"I assured her that I did qualify," says Frances.

The business is Shared Heritage, a project to create quality day-care centers in rural areas, managed by care providers over age 55.

The idea came out of Hawkeye Area Community Action Program (HACAP), an agency whose work with both preschool aged children and the rural elderly made a union of the two seem natural. Why couldn't licensed day-care centers be run by some of the best qualified and motivated people to do it — the elderly?

For parents it would mean putting their young children and after schoolers into situations with reliable, educational, and, undoubtedly, loving supervision. For the elderly it would be an independent business, aided by HACAP and a source of both money and satisfaction.

For Frances McGaffey it may have been the answer. Five years ago her husband died from a brain tumor. His death left Frances with four children at home.

Two years ago she moved to Washington, Iowa. She is in partnership with her mother in a 216-acre farm, which they rent out. During the past year she learned the bulk of her income — social security survivor's benefits — would end when her youngest boy, now 13, turned 16. Because she had never worked outside the home, that would mean a 2-year gap between the end of her children's benefits and start of her own.

Shared Heritage is her way of getting ahead to meet those lean years. Without HACAP's help, she would not have set herself up as a care provider.

When Frances or anyone else contacts Shared Heritage, he or she is first paid a visit by project coordinator Christopher Carman. He explains in detail how the program is structured and asks questions to make sure the person will be comfortable with children.

In addition, he does a check of the homes to see if they will meet state requirements for a center — basically a safe home with adequate room.

Prior to applying for a license to operate the day-care center, each Shared Heritage provider participates in a series of five all-day training sessions. HACAP utilizes staff members from Head Start and Outreach, as well as bringing in professionals to teach such things as first aid and infant nutrition.

The emphasis in the sessions is to involve the providers in discussion, utilizing their vast experience pool on such topic areas as child development, social and emotional growth, guidance and discipline, learning activities, and games.

"We're spending time each day making educational games and things that the care providers can use in their homes," explains Carman. Frances particularly likes the emphasis on reading.

"I never got to read to my kids as much as I would have liked, because I had a large family — 10 children.

"I was comfortable in the class," she continues. "It was right along the lines of how we raised our children. On discipline they wanted us to go softly. Talk to the children, and when there is fighting, divert their attention to something else. That will sometimes solve the problem. You can avoid strong discipline just by meeting their needs. You have to put their needs above your desires."

HACAP took the providers through the various training areas and assisted them in applying for their licenses.

They went through with no problems. "If I were trying to do it on my own," observes Frances, "I would have been at a loss."

As a service, HACAP is not only concerned that providers get something out of it, they also want to make better care accessible to parents.

Parents initially contact HACAP after learning of Shared Heritage. They will be given the name and phone number of someone such as Frances. But they will also receive a handbook that explains to them what a good day-care center can do for their preschoolers; and they are given rules for effective utilization of the center.

Frances is her own boss in terms of dealing with parents. She sets up interviews with them. Parents will have a written agreement worked out at that meeting. Frances puts down on paper what she expects: her rules of behavior; the times the children will be there (she can't keep kids overnight); places they might go in a normal day (the park, library, shopping); and her plan for caring for their children.

Parents, in turn, put down what they expect and will accept in the way of discipline, any special needs of their children, and how to reach them in emergencies. They also provide a separate sheet for the child's physician, letting him know Frances is the care provider.

Frances determines her fee and the hours. Of course, she is free to accept or reject any family. In her case, the only situations that might warrant her rejection are handicapped children, for whom she has no experience or training, and, if she is full capacity, a disruptive child.

Currently she has five children who are with her from over 8 hours a day to just after school. The state allows her six at any one time.

Though she is independent, Frances maintains ties with HACAP, which provides a toy lending library that she uses. She also takes advantage of their child food program. To qualify, she must prepare menus a month in advance, which HACAP reviews from a nutritional standpoint. Frances is reimbursed on a fixed schedule, which works out to $1.07 per child per lunch, 54¢ for breakfast, and 32¢ for snacks. "It is an amount that more than covers the costs of food," explains Carman. "The fairly high rate of reimbursement enables care providers to serve the nutritional meals kids need."

LEARNING activities interest the children in Frances McGaffey's day-care center. Brian and Brad Waedell, left, watch as Frances feeds the baby sister of Brian Erickson, right.

Presently about two dozen care providers are operating in four rural eastern Iowa counties.

Their ages range from 55 to 75. So far all have been widows, though Carman sees no reason why people in other circumstances could not take advantage of the project.

He finds a variety of reasons why Shared Heritage appeals to the providers. One woman explained that she had cared for her infant grandchildren and wanted to continue that experience. Another had a distant family and wanted regular contact with small children.

In one center two ladies shared the work, which allowed both of them to maintain active outside lives.

Eventually between 35 and 50 providers should be in place, handling over 100 children. They will be independent operators, which HACAP will monitor with spot checks and through its food program. Also, providers can turn to HACAP to troubleshoot if they have parents who are not cooperating. But for the most part it is expected that these centers will naturally grow because of that combination of elderly and their heritage and youth.

LINN COUNTY

HACAP program benefits senior citizens, parents seeking child care

Gazette photo by John McIvor

Pat Chavez enjoys working through the HACAP Shared Heritage Child Care Program. Chavez and some of her charges enjoy spring weather in her back yard. From left are Joshua LaKose, 5; Lisa LaKose, 2; Jesse LaKose, 9 months, and Cassandra Chavez, 2.

By Alan Bell
Gazette staff writer

When Pat Chavez retired from Rockwell-Collins in January, she didn't sit still long. A week after she retired, the 58-year-old grandmother began baby-sitting.

She is involved in HACAP's Shared Heritage Child Care Program, which matches baby sitters over the age of 55 with parents needing care for their children.

Chavez, of 1437 30th St. SE, has nothing but good things to say about Shared Heritage. She says she loves children and enjoys having them around.

Through the program, older people like Chavez have the opportunity not only to be around kids, but to earn money at the same time.

The program is a demonstration project funded by the Department of Health and Human Services.

Chris Carman, who runs the program for the Hawkeye Area Community Action Program, describes Shared Heritage this way:

"It's set up to meet the . . . needs for older people for enjoyable work, social contact with children and income. The kids benefit by being with older people. They get a positive attitude about aging. . . . It lets them see older people who are active, alive, up and doing things. It's different than kids visiting people in a nursing home."

The project aims to help parents in Iowa, Washington, Benton, Jones and (since January) Linn counties get child care in a more organized fashion.

"It's hard for people in rural areas to find organized care," Carman said. Benton, Iowa and Jones counties have no organized daylong day care, he said.

Shared Heritage, which began last fall, tries to train its care providers in child nutrition, safety, activity programs, discipline and other elements of child care.

All care providers are registered with the state. They are checked for criminal records and child abuse.

Parents referred to the sitters are given information on the program and reminded of their rights and responsibilities to make sure their children get appropriate care.

The care providers and parents agree on cost and hours, said Carman.

The idea of elderly people taking care of children isn't new, he said, but HACAP tries to provide that care in a more organized way.

THOSE PARTICIPATING in the program say they like it.

"Right away I thought it was a great idea," said Frances McGaffey, a 57-year-old care provider in Washington. "I was searching for something to do. I was searching for some other source of income."

McGaffey, who takes care of four children, said she she thinks the toy-lending library is a great part of the program. "I have toys from the toy-lending library and I've requested more," she said.

Carman said HACAP is asking for donations of more toys to build up the library.

Chavez said Shared Heritage training was a big help.

"I loved it," she said of the HACAP training. "It made me feel better, more comfortable. I was impressed."

She said there are advantages in care provided by an older person. Among those advantages are more experience, more patience and more time to concentrate on the kids.

"With my own children it was a 24-hour deal," she said. Now she goes to bed at night without worrying about being awakened by a child needing care. "I wake up the next morning raring to go."

Chavez also likes the toy library. And nutrition advice offered by the program also is helpful. "It gives me something to go on. We make the menus out ahead of time." A dietitian from HACAP reviews the menus to ensure they are well-balanced and nutritional.

Besides all the health- and care-related benefits, Chavez said there are other pluses. "It feels good to hold them and to activate their minds," she said. "I'm looking forward to going to the park this summer."

According to Carman, 23 older people are involved in the various stages of the program, some taking care of children, some in training and some trained and ready to take children. About 20 children are being cared for.

61.

Jimmy, how can we let HACAP employees know that there are some "Shared Heritage" care providers ready to care for kids? I'm tired of being a silhouette- I want some action!
Gosh, ma'am... I guess we should hit 'em where it counts- in the paycheck! Let's send out a note with all the checks next pay day!

Shared Heritage Child Care Project

The Shared Heritage project is currently referring parents needing childcare to older persons (age 55+) who are registered family daycare providers. While there aren't Shared Heritage homes in the entire HACAP service area, we do have homes ready to go in several locations. PLEASE SPREAD THE WORD! We'd also be glad to help HACAP employees sort through childcare options. For more information, call Chris Carman at 366-7631 (Central Office)

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Shared Heritage

Child Care Project

DO YOU NEED CHILD CARE ?

The Shared Heritage Child Care Project refers parents needing childcare to older people (age 55+) who are registered family daycare providers. Full-day or after-school care at reasonable rates. For more information call:

366-7631
OR
1-800-332-5289

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Belle Plaine
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444-2520

NEED CHILD CARE?

The HACAP Shared Heritage Program refers families needing child care to loving, experienced care givers. Age 55 and older in the Belle Plaine area.

Call Cris Carman at HACAP toll free
1-800-332-5289 or
call 1-366-7631
Equal Opportunity Agency

Garst Pay Days. February

15 and 16

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Newhall, IA

David Garst
David Garst
Garst Seed Company

Pay for your seed and earn a 6% cash discount, generous volume discounts and a jacket if you buy 12 bags or more.

GARST

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NEWHALL, IA

Recruiting Children For Your Day Care Home

Shared Heritage is actively recruiting children for affiliated day care homes with signs, newspaper ads and through community contacts.

Studies have shown, though, that the way most parents find out about child care is by "word-of-mouth". Making use of the contacts you have in your neighborhood or community may be the best way to find families who need child care. Here are some ideas for you to try:

- Talk to neighbors. Let them know you will be taking care of children. They will appreciate the convenience of having someone close by that they know and trust.

- Tell friends, relatives and acquaintances. These people don't necessarily have to have children themselves, they may know of someone else who needs child care.

- Give your name to the secretary at the local elementary school. School secretaries often pass along information to parents looking for child care.

- Tell people in your church or contact other churches in your neighborhood.

- Put up a few signs with your name and phone number. (We'll supply you with copies of the sign on the next page.) You can put signs up at grocery stores, laundromats, work places, libraries, etc. - anywhere people with children go. We put up signs for Shared Heritage at all these places, but sometimes people prefer to call a caregiver directly - that's what your own sign would allow them to do.

- Place a small classified ad. While we have been running ads for families, you are welcome to do so, too. Maybe you know of a small, local "shopper" paper that we haven't used.

We are proud of the people who are part of Shared Heritage and want to do all we can to find children for the homes. If we are both actively looking for families needing child care we have a good chance of success!

Shared Heritage: Parent Information

Thank you for your interest in the Shared Heritage Child Care Project. This flyer will provide you with additional information about the program and our referral policy.

Shared Heritage brings mature, experienced care givers (age 55 and over) together with preschool and school age children. The project builds upon "grandparent - grandchild" type relationships to create a unique inter-generational child care system.

It is our goal to encourage quality childcare by offering support services to daycare homes associated with the Shared Heritage Project. To promote quality:

1). We only work with caregivers who are registered as family daycare homes with the State of Iowa. (or who are in the process of receiving their registration.)
2). We conduct an interview and home safety check with each program participant.
3). We check the references supplied to us by the home providers. Parents may ask to see these.
4). We require caregivers in our program to go through a child development training program.
5). We have a home visitor who comes to the family daycare home monthly to provide monitoring, support and advice.
6). A toy lending library has been established to provide learning materials, toys and games for the homes.
7). Through participation in the Child Care Food Program the homes associated with Shared Heritage offer high quality, nutritious meals to children.

While these services and policies promote quality care, we wish to emphasize that the caregivers associated with Shared Heritage are all self-employed and individually responsible for the care that takes place in their homes. We leave parents with the responsibility of judging the quality of care and suitability of particular homes. Parents also work out the financial arrangements directly with the caregiver. We encourage the use of a simple written agreement detailing hours, cost of care and other important points, to avoid misunderstandings between parents and caregivers.

SHARED HERITAGE REFERRALS

We would be pleased to refer you to caregivers in your area participating in Shared Heritage.

In making a referral, we are simply telling you about an option that exists. It is then your responsibility to check into it more thoroughly and decide if it meets your needs and expectations. Please remember that while we work to promote quality in home care, we cannot provide parents with guarantees nor do we accept responsibility or liability for the actions of the caregivers. In choosing child care, we encourage parents to exercise their

rights and responsibilities in the following ways:

1). Look into several childcare options that exist in your area. Call each of them for more information.

2). Visit situations that seem good and ask questions. Look for enjoyable activities, warm relationships and safe conditions.

3). After making a decision, work to develop good communication with the caregiver. Find out how the day has gone, what the children have done, etc.

We hope you'll be pleased with the homes in the Shared Heritage system.

For information on caregivers in your area call 366-7631. (or toll free: 1-800-332-5289) in order to contact Christopher Carman or Lois Webb.

SHARED HERITAGE REFERRAL PROCESS

We will actively seek children in the area you live with posters, newspaper ads and other means. When parents needing childcare contact us, this is how referrals to you will be handled:

1) Parents call HACAP and we tell them about our program and the homes connected with Shared Heritage in their area. We'll give them phone numbers of nearby caregivers and send them information, too. If we give out your phone number, we'll call you to let you know that you may be receiving a call from a parent.

2) Parents call you and ask any questions they may have. You can give out a lot of basic information on the phone, but if they are interested, they should come visit. You can set up a time for their visit during the phone conversation.

3) Parents visit your home. Show them around, tell them some of the things you have planned to do with the children, answer their questions. Talk with them about:

-Their child: What he/she likes to do, his/her schedule, fears, special needs, etc.

-Their childcare needs: How many hours per day, how many days per week, on a regular basis or temporary?

-Cost and payment arrangements: It is important to clearly talk about the financial aspect of the care situation. It is best if parents pay in advance for the upcoming week; this protects you from losses. You should think in advance about the rates you want to charge for various types of care.

FULL-DAY CHILD CARE: _____ per day _____ per week

AFTER SCHOOL CARE: _____ per day _____ per week

BEFORE & AFTER SCHOOL CARE: ____ per day _____ per week

INFANT-TODDLER CARE: _____ per day _____ per week

RATES FOR MORE THAN 1 CHILD FROM THE SAME FAMILY- (same rate or reduced rate): _____

4) Parents may decide during the visit to enroll their child or may want to go home and think about it. It is important that they not feel rushed to make a decision and that they feel comfortable with the one they make.

5) Before parent send their children they must:

a) Go over the mutual agreement form with you. Fill in the hours, rates and payment schedule. Both you and the parents need to sign them.

b) Fill out completely the intake records and permission forms. All these forms must be filled out in full by the parents in advance. If they cannot get the medical and immunization records prior to the first day, they should at least have a doctor's appointment made and tell you the date. These intake forms will be printed on carbons- you should keep the original and send us the copy.

6) Call the Shared Heritage staff to let us know you have a child starting (in addition to sending us the forms). At this point the child should be ready to start coming to your home!